### **PUBLIC DISCLOSURE COPY**

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

| A                                       | For the 2                     | 017 calendar year, or tax year beginning 09/01 , 2017, and en   | ndina                    | 08/3                         | 31                  | <b>, 20</b> 18                            |  |  |  |
|---|-------------------------------|---|--------------------------|------------------------------|---------------------|---|--|--|--|
| В                                       |                               | oplicable: C Name of organization NORTHWESTERN UNIVERSITY   |                          |                              | Employe             | er identification number                  |  |  |  |
| $\Box$                                  | Address ch                    |   |                          |                              | 36-2167817          |   |  |  |  |
| $\exists$                               | Name char                     |   | n/suite                  | - 1                          | Telephor            | ne number                                 |  |  |  |
| $\Box$                                  | Initial retur                 |   | .,, 00.10                | i -                          | •                   | (847) 491-3741                            |  |  |  |
| $\Box$                                  |                               |   |                          |                              |                     | (047) 431-3741                            |  |  |  |
| $\exists$                               | Final return/                 |   |                          | ١,                           | Gross re            | ceipts \$ 4,640,511,397                   |  |  |  |
| $\vdash$                                | Amended r                     | pending F Name and address of principal officer: CRAIG JOHNSON  | 1,,,                     |                              |                     |   |  |  |  |
| Ш                                       | Application                   |   | 1                        |                              |                     | subordinates? Yes No                      |  |  |  |
|   |                               | SAME AS C ABOVE   |                          | . ,                          |                     | included? Yes No list. (see instructions) |  |  |  |
| <u> </u>                                | Tax-exemp                     |   |                          |                              |                     |   |  |  |  |
| <u>J</u>                                | Website:                      |   |                          | (c) Group e                  | r                   |   |  |  |  |
| _                                       |                               | panization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of for   | rmation:                 | 1851                         | M State             | of legal domicile: IL                     |  |  |  |
|   | art I                         | Summary   |                          |                              |                     | · · · · · · · · · · · · · · · · · · ·     |  |  |  |
|   | <b>1</b> B                    | riefly describe the organization's mission or most significant activities: ED   | UCATIO                   | N AND RE                     | SEARC               | H<br>                                     |  |  |  |
| Activities & Governance                 |                               |   |                          |                              |                     |   |  |  |  |
| naı                                     |                               |   |                          |                              |                     |   |  |  |  |
| Ver                                     | 1                             | theck this box $lacktriangle$ if the organization discontinued its operations or dispose  | ed of mo                 | ore than 2                   | 25¦% of i           | ts net assets.                            |  |  |  |
| တိ                                      | 1                             | lumber of voting members of the governing body (Part VI, line 1a)   |                          |                              | 3                   | 36  |  |  |  |
| ૐ                                       | 4 N                           | lumber of independent voting members of the governing body (Part VI, line   | 1b) .                    |                              | 4                   | 34  |  |  |  |
| ţį                                      | 5 T                           | otal number of individuals employed in calendar year 2017 (Part V, line 2a)   |                          |                              | 5                   | 25,684                                    |  |  |  |
| ξį                                      | 6 T                           | otal number of volunteers (estimate if necessary)   |                          |                              | 6                   | 151                                       |  |  |  |
| Ä                                       | 7a T                          | otal unrelated business revenue from Part VIII, column (C), line 12   |                          |                              | 7a                  | (16,001,127)                              |  |  |  |
|   | b N                           | let unrelated business taxable income from Form 990-T, line 34  |                          |                              | 7b                  | (19,623,733)                              |  |  |  |
|   |                               | ,   |                          | Prior Yea                    | r                   | Current Year                              |  |  |  |
| Revenue                                 | 8 C                           | Contributions and grants (Part VIII, line 1h)   |                          | 395,6                        | 69,600              | 373,724,245                               |  |  |  |
|   | 1                             | rogram service revenue (Part VIII, line 2g)   |                          | 1,874,9                      | 935,178             | 2,001,064,987                             |  |  |  |
| eve                                     |                               | ovestment income (Part VIII, column (A), lines 3, 4, and 7d)  |                          | 647,4                        | 182,893             | 774,539,687                               |  |  |  |
| œ                                       | 1                             | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | 37,0                     | 063,687                      | (5,541,174)         |   |  |  |  |
|   | 1                             | otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | 2,955,151,358            |                              | 3,143,787,745       |   |  |  |  |
|   |                               | irants and similar amounts paid (Part IX, column (A), lines 1-3)  |                          |                              | 38,464              | 528,829,620                               |  |  |  |
|   | 1                             | enefits paid to or for members (Part IX, column (A), line 4)  |                          |                              |                     |   |  |  |  |
| (0                                      | 1                             |   |                          | 1,344,111,489                |                     | 1,420,530,610                             |  |  |  |
| Expenses                                | 1                             | rofessional fundraising fees (Part IX, column (A), line 11e)  |                          |                              | 598,550             | 424,469                                   |  |  |  |
| ben                                     |                               | otal fundraising expenses (Part IX, column (D), line 25)  62,824,192  |                          |                              | 33,000              | .= ,,,,==                                 |  |  |  |
| Ĕ                                       |                               | otal full draining expenses (Fart IX, column (A), lines 11a-11d, 11f-24e)   |                          | 922.0                        | 911,404             | 1,007,862,169                             |  |  |  |
|   | 1                             | otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  |                          |                              | 559,907             | 2,957,646,868                             |  |  |  |
|   |                               | levenue less expenses. Subtract line 18 from line 12  |                          |                              | 191,451             | 186,140,877                               |  |  |  |
|   |                               | evenue less expenses. Subtract line 10 nont line 12   | Beginn                   | ning of Curr                 |                     | End of Year                               |  |  |  |
| ts or                                   | 20 -                          | otal assets (Part X, line 16)   | 209.111                  | 14,485,5                     |                     | 15,469,351,745                            |  |  |  |
| Net Assets or<br>Fund Balances          | 20 T                          |   |                          | <u></u>                      | 562,684             | 3,227,581,845                             |  |  |  |
| det /                                   | 21 1<br>22 N                  |   | -                        | 11,680,9                     |                     | 12,241,769,900                            |  |  |  |
| *************************************** |                               | let assets or fund balances. Subtract line 21 from line 20  |                          | 11,000,8                     | 00,023              | 12,241,703,300                            |  |  |  |
|   | art II                        |   |                          |                              |                     | 1   |  |  |  |
| tru                                     | ider penaltie<br>ie correct a | es of perjury, I declare that I have examined this return, including accompanying schedules and s<br>and complete. Declaration of preparer (other than officer) is based on all information of which prep | tatements<br>parer has a | i, and to the<br>any knowled | e best of n<br>dae. | ny knowleage and belief, it is            |  |  |  |
|   | 10,001,001,0                  | 1   |                          |                              | 7-11-               | 10  |  |  |  |
| e:                                      |                               | Jay Sm  |                          | <br>Date                     | 4 0-                | <u></u>                                   |  |  |  |
| Sig                                     | - 1                           | Signature of pricer .   |                          | Date                         | ;                   |   |  |  |  |
| He                                      | re                            |   |                          |                              |                     |   |  |  |  |
|   |                               | Type or print name and title CRAIG JOHNSON, SENIOR VP, BUSINESS AND FIN   |                          |                              |                     | DTIN                                      |  |  |  |
| Pa                                      | iid                           | Print/Type preparer's name  Preparer's signature  MARILYN F FARIEY  Marily & July   | Date                     | 44.0                         | Check [             | if PTIN                                   |  |  |  |
|   | eparer                        | WWW.T.T.T.T.T.T.T.T.T.T.T.T.T.T.T.T.T.T   | 7/10                     | /19                          | self-emp            |   |  |  |  |
|   | se Only                       | Firm's name ► KPMG LLP  |                          | Firm':                       | s EIN 🕨             | 13-5565207                                |  |  |  |
|   |                               | Firm's address ► 515 BROADWAY, ALBANY, NY 12207   |                          | Phon                         | e no.               | (518) 427-4600                            |  |  |  |
| Ma                                      | y the IRS                     | discuss this return with the preparer shown above? (see instructions)   |                          |                              |                     | 🗸 Yes 🗌 No                                |  |  |  |
| For                                     | Paperwo                       | rk Reduction Act Notice, see the separate instructions.   | at. No. 112              | 282Y                         |                     | Form <b>990</b> (2017)                    |  |  |  |

|           |  | age Z |
|-----------|--|-------|
| Part      |  |       |
|           | Check if Schedule O contains a response or note to any line in this Part III   |       |
| 1         | Briefly describe the organization's mission:   |       |
|           | NORTHWESTERN'S MISSION IS TO PROVIDE THE HIGHEST-QUALITY EDUCATION FOR ITS STUDENTS, TO DEVELOP  |       |
|           | INNOVATIVE PROGRAMS IN RESEARCH, AND TO SUSTAIN AN ACADEMIC COMMUNITY THAT EMBRACES THESE  |       |
|           | ENTERPRISES.   |       |
| 2         | Did the organization undertake any significant program services during the year which were not listed on the   | —     |
| _         | prior Form 990 or 990-EZ?  | Nο    |
|           | If "Yes," describe these new services on Schedule O.   |       |
| 3         | Did the organization cease conducting, or make significant changes in how it conducts, any program   |       |
|           | services?  | No    |
|           | if "Yes," describe these changes on Schedule O.  |       |
| 4         | Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other |       |
|           | the total expenses, and revenue, if any, for each program service reported.  | 1010, |
|           |  |       |
| 4a        | (Code: ) (Expenses \$ 2,035,524,999 including grants of \$ 419,653,230 ) (Revenue \$ 1,307,266,687 )   |       |
|           | EDUCATION OF STUDENTS: FOR THE 2018 ACADEMIC YEAR, 8,159 UNDERGRADUATES AND 9,588 GRADUATES AND  |       |
|           | PROFESSIONAL SCHOOL STUDENTS ENROLLED FULL-TIME AT THE UNIVERSITY. THE EXEMPT PURPOSE OF   |       |
|           | NORTHWESTERN UNIVERSITY IS TO PROVIDE EDUCATIONAL SERVICES TO ITS STUDENTS. THIS INCLUDES SUPERIOR   |       |
|           | UNDERGRADUATE EDUCATION FOR A DIVERSE STUDENT BODY IN A COMPREHENSIVE RANGE OF ACADEMIC AND  |       |
|           | PROFESSIONAL FIELDS. AT THE GRADUATE LEVEL, NORTHWESTERN'S ROLE ENCOMPASSES OFFERINGS IN THE MAJOR   |       |
|           | ACADEMIC AND PROFESSIONAL FIELDS, CLOSELY RELATED TO RESEARCH, CREATIVE ACTIVITIES, AND CLINICAL   |       |
|           | SERVICES.  |       |
|           | 444.88444444444444444444444444444444444  |       |
|           | 94444444444444444444444444444444444444   |       |
|           | P  |       |
|           | 444444444444444444444444444444444444444  |       |
| 4b        | (Code: ) (Expenses \$ 486,912,000 including grants of \$ 109,176,390 ) (Revenue \$ 613,843,760 )   |       |
|           | RESEARCH ACTIVITIES: THE RESEARCH PROGRAM AT NORTHWESTERN UNIVERSITY IS A MAJOR COMPONENT OF   |       |
|           | UNIVERSITY EFFORTS, ASSURING INSTITUTIONAL LEADERSHIP IN SCIENTIFIC DISCOVERY, INTELLECTUAL INQUIRY,   |       |
|           | AND CREATIVE PERFORMANCE. THE CHARACTER OF THIS RESEARCH SHAPES ALL AREAS OF UNIVERSITY ENDEAVOR,  |       |
|           | ESPECIALLY GRADUATE EDUCATION AS WELL AS UNDERGRADUATE STUDIES.  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
| 4c        | (Code: ) (Expenses \$ 136,913,000 including grants of \$ ) (Revenue \$ 83,906,819 )  |       |
|           | AUXILIARY ENTERPRISES SERVE THE EDUCATIONAL MISSION BY PRIMARILY PROVIDING RESIDENCES AND FOOD   |       |
|           | SERVICES, AND OTHER VARIOUS GOODS AND SERVICES TO SUPPORT UNIVERSITY STUDENT, FACULTY, AND STAFF   |       |
|           | ACTIVITIES.  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
|           |  |       |
| 4d        | Other program services (Describe in Schedule O.)   |       |
|           | (Expenses \$ including grants of \$ ) (Revenue \$ )  |       |
| <b>4e</b> | Total program service expenses ► 2,659,349,999   |       |

2,659,349,999

| 'arı   | Checklist of nequired scriedules   |     | V        | - N-     |
|--------|--|-----|----------|----------|
| 4      | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"  |     | Yes      | No       |
| 1      | complete Schedule A  | 1   | 1        |          |
| 2      | is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  | 2   | <b>✓</b> |          |
| 3      | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I   | 3   |          | <b>✓</b> |
| 4      | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II   | 4   | 1        |          |
| 5      | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  | 5   |          | ✓        |
| 6      | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I   | 6   | 1        |          |
| 7      | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7   |          | ✓        |
| 8      | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 8   |          | ✓        |
| 9      | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV   | 9   |          | ✓        |
| 10     | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V   | 10  | ✓        |          |
| 11     | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.   |     |          |          |
| а      | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  | 11a | ✓        |          |
| b      | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII   | 11b | ✓        |          |
| С      | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  | 11c |          | ✓        |
| d      | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d |          | ✓        |
| e<br>f | Did the organization report an amount for other ilabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11e | <b>√</b> |          |
|        | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII   | 12a |          | <b>\</b> |
| b      | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b | ✓        |          |
| 13     | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  | <b>√</b> |          |
| 14 a   | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a | ✓        |          |
| D      | fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV   | 14b | 1        |          |
| 15     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV   | 15  | 1        |          |
| 16     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign Individuals? If "Yes," complete Schedule F, Parts III and IV.  | 16  | 1        |          |
| 17     | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  | 17  | 1        |          |
| 18     | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.  | 18  | 1        |          |
| 19     | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III  | 19  |          | 1        |
|        | ii res, complete conedule d, Faltiii   |     | n 990    | (201     |
|        |  |     |          |          |

| Part        | IV Checklist of Required Schedules (continued)  |            |              | . ago    |
|-------------|---|------------|--------------|----------|
|             |   |            | Yes          | No       |
| 20 a        | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   | 20a        |              | <b>✓</b> |
|             | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b        |              |          |
| 21          | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II   | 21         | /            |          |
| 22          | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III   | 22         | 1            |          |
| 23          | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  | 23         | 1            |          |
| 24a         | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a                            | 24a        |              |          |
| b<br>C      | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24b        |              | 1        |
| d           | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?   | 24d        |              | V /      |
| <b>25</b> a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a        |              | 1        |
| b           | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.                                      |            |              | \ \ \    |
| 26          | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any  | 25b        | <del> </del> | <b>v</b> |
| 20          | current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  | 26         | 1            |          |
| 27          | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27         | 1            |          |
| 28          | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):   |            |              |          |
| a<br>b      | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  Schedule L, Part IV  | 28a<br>28b | <b>√</b>     | ✓        |
| С           | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  | 28c        | <b>V</b>     |          |
| 29          | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  | 29         | <b>▼</b>     |          |
| 30          | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  | 30         | <i>y</i>     |          |
| 31          | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  | 31         | •            | 1        |
| 32          | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  | 32         |              | <b>√</b> |
| 33          | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  | 33         | 1            | •        |
| 34          | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  | 34         | <b>∀</b>     |          |
| 35a         | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a  | 35a        | <b>∀</b>     |          |
|             | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable   | 35b        | 1            |          |
|             | related organization? If "Yes," complete Schedule R, Part V, line 2   | 36         |              | <b>✓</b> |
|             | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI   | 37         |              | ✓        |
| 38          | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.   | 38         | ,            |          |

Form 990 (2017)

| 0,11,00    |  |             |             |  |
|------------|--|-------------|-------------|--|
| Part       |  |             |             |  |
|            | Check if Schedule O contains a response or note to any line in this Part V   | • • •       | Yes         | No   |
| 4          | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   | 2           | 103         | 140  |
| 1a         | Elifet (10 Hallips) tebelted in percent to a series of a series of the s |             |             |  |
| Ь          | Did the organization comply with backup withholding rules for reportable payments to vendors and   | - X1665-X66 |             |  |
| С          | reportable gaming (gambling) winnings to prize winners?  | 1c          | <b> </b>    |  |
| 2a         | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  |             |             |  |
| 20         | Statements, filed for the calendar year ending with or within the year covered by this return  2a 25,68  | 4           |             |  |
| ь          | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   | 2b          | <b> </b> ✓  |  |
|            | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  |             |             |  |
| <b>3</b> a | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | 3a          | 1           | 100m/A1700010                                    |
| ь          | If "Yes." has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  | 3b          | <b>√</b>    |  |
| 4a         | At any time during the calendar year, did the organization have an interest in, or a signature or other authority  | '           |             |  |
|            | over, a financial account in a foreign country (such as a bank account, securities account, or other financial   | !           |             |  |
|            | account)?  | 4a          | 1           |  |
| ь          | If "Yes," enter the name of the foreign country:   QA, UK  QA, UK  |             |             |  |
|            | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts  | <b>1</b>    |             |  |
|            | (FBAR).  |             |             |  |
| 5a         | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a          |             | <b>V</b>   |
| Ь          | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b          |             | <b>V</b>   |
| C          | if "Yes" to line 5a or 5b, did the organization file Form 8886-T?  | 5c          |             |  |
| 6a         | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the   | 6a          |             | 1  |
|            | organization solicit any contributions that were not tax deductible as chantable contributions?  |             |             | -  |
| D          |  | 6Ь          |             |  |
| -          | gifts were not tax deductible?   |             |             |  |
| 7<br>a     | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods  | ,           |             |  |
| _          | and services provided to the payor?  | 7a          | 1           |  |
| ь          | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b          | 1           |  |
| C          | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was   | ;           |             |  |
| _          | required to file Form 8282?  | 7c          |             | ✓  |
| d          | if "Yes," indicate the number of Forms 8282 flied during the year  |             |             |  |
| е          | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e          |             | <b>✓</b>   |
| f          | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .   | 7f          |             | <b>✓</b>   |
| g          | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g          | ļ           | ļ  |
| h          | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7h          |             |  |
| 8          | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the   |             |             | ١,   |
|            | sponsoring organization have excess business holdings at any time during the year?   | 8           |             | <b> </b>   |
| 9          | Sponsoring organizations maintaining donor advised funds.  | 9a          |             | ./   |
| a          | Did the sponsoring organization make any taxable distributions under section 4966?   | 9b          |             | 1  |
| . b        | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  |             |             |  |
| 10         | Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12   |             |             |  |
| a<br>b     | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b  |             |             |  |
| 11         | Section 501(c)(12) organizations. Enter:   |             |             |  |
|            | Gross income from members or shareholders  |             |             |  |
| b          | Gross income from other sources (Do not net amounts due or paid to other sources   |             |             |  |
|            | against amounts due or received from them.)  |             |             |  |
| 12a        | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12a         |             |  |
| Ь          | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  |             |             |  |
| 13         | Section 501(c)(29) qualified nonprofit health insurance issuers.   |             |             |  |
| а          | Is the organization licensed to issue qualified health plans in more than one state?   | 13a         | g vassarsoo |  |
|            | Note. See the instructions for additional information the organization must report on Schedule O.  |             |             |  |
| Ь          | Enter the amount of reserves the organization is required to maintain by the states in which   |             |             |  |
|            | the organization is licensed to issue qualified health plans   | -           |             |  |
| C          | Enter the amount of reserves on hand   | 44-         |             | +,-  |
| 14a        | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a         |             | <del>                                     </del> |

| Part        |  | and         | for a          | "No       |
|-------------|--|-------------|----------------|-----------|
|             | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S  | ee ins      | struct         |           |
| Sect        | Check if Schedule O contains a response or note to any line in this Part VI  | • •         | -              | . ⊻       |
| ******      |  |             | Yes            | No        |
| 1a          | Enter the number of voting members of the governing body at the end of the tax year   1a 36  | 30.35       |                |           |
|             | If there are material differences in voting rights among members of the governing body, or   | 000000      | ili (ili       |           |
|             | if the governing body delegated broad authority to an executive committee or similar   |             |                |           |
| L           | committee, explain in Schedule O.  | 945         | 100010         |           |
| ь<br>2      | Enter the number of voting members included in line 1a, above, who are independent . 1b 34 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with  |             |                |           |
| -           | any other officer, director, trustee, or key employee?   |             |                |           |
| 3           | Did the organization delegate control over management duties customarily performed by or under the direct  | 2           | <b>✓</b>       |           |
|             | supervision of officers, directors, or trustees, or key employees to a management company or other person?   | 3           |                | 1         |
| 4           | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4           |                | 7         |
| 5           | Did the organization become aware during the year of a significant diversion of the organization's assets?   | 5           |                | 1         |
| 6           | Did the organization have members or stockholders?   | 6           |                | ✓         |
| 7a          | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?   |             |                |           |
| ь           | one or more members of the governing body?   | 7a          |                | <b>✓</b>  |
| D           | stockholders, or persons other than the governing body?  | -L          |                | ,         |
| 8           | Did the organization contemporaneously document the meetings held or written actions undertaken during   | 7b          |                | <b>/</b>  |
|             | the year by the following:   |             |                |           |
| a           | The governing body?  | 8a          | ✓              |           |
| b           | Each committee with authority to act on behalf of the governing body?  | 8b          | 1              |           |
| 9           | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at   |             |                |           |
| Coati       | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O  | 9           |                | <b>✓</b>  |
| Secu        | on B. Policies (This Section B requests information about policies not required by the Internal Revenue  | ie Co       | Yes            | No        |
| <b>10</b> a | Did the organization have local chapters, branches, or affiliates?   | 10a         | 162            | √<br>✓    |
| Ь           | If "Yes," did the organization have written policies and procedures governing the activities of such chapters.   | IUa         |                | <u> </u>  |
|             | affiliator, and branches to ansure their appretions are consistent with the appreciations  | 10b         |                |           |
| 11a         | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a         | <b>√</b>       |           |
| Ь           | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |             |                |           |
| 12a         | When all the state of the state | <b>12</b> a | <b>✓</b>       |           |
| Ь           |  | 12b         | ✓              |           |
| С           | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.  | 10-         | ,              |           |
| 13          | Did the organization have a written whistleblower policy?  | 12c         | <b>√</b>       |           |
| 14          | Did the organization have a written document retention and destruction policy?   | 14          | 7              |           |
| 15          | Did the process for determining compensation of the following persons include a review and approval by   |             |                |           |
|             | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |             | 46             |           |
| a           |  | 15a         | <b>√</b>       |           |
| ь           |  | 15b         | ✓              | 225420004 |
| 16a         | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  |             |                |           |
|             | with a tayable ontity during the year?   | 16a         | <i>,</i>       |           |
| b           | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its   | 100         | <b>*</b>       |           |
|             | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the  |             |                |           |
|             |  | 16b         | 529/445-02-0-1 | ✓         |
|             | on C. Disclosure   |             |                |           |
| 17<br>18    | List the states with which a copy of this Form 990 is required to be filed CA, CO, MA, MD, MI, NH, OH, OR, SC  | 5647        |                |           |
| 10          | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.  | 5U1(C       | )(3)s          | only)     |
|             | ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)   |             |                |           |
| 19          | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interesting the control of the described in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interesting the conflict of the described in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interesting the conflict of the described in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interesting the conflict of the described in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interesting the described in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interesting the described in Schedule O whether (and if so, how) the organization made its governing documents and the described in Schedule O whether (and if so, how) the organization made its governing documents and the described in Schedule O whether (and if so, how) the organization made its governing documents and the described in  | rest n      | olicv.         | . and     |
|             | financial statements available to the public during the tax year.  | P           | y              | ,         |
| 20          | State the name, address, and telephone number of the person who possesses the organization's books and received  | ords:       | <b>•</b>       |           |
|             | NICOLE VAN LAAN, CONTROLLER, 619 CLARK ST., EVANSTON, IL 60208, (847) 491-4722, FAX: (847) 467-7261  |             |                |           |

Form 990 (2017)

| (        | - /                                    |             |                |           |             |            |     |
|----------|--|-------------|----------------|-----------|-------------|------------|-----|
| Part VII | Compensation of Officers, Directors, T | Trustees, i | Key Employees, | Highest • | Compensated | Employees, | and |
|          | Independent Contractors                |             |                |           |             |            |     |

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
  organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

| ☐ Check this box if neither the organization |  | d orga   | aniz                  | atio                        | n c                                  | ompe                          | nsa              | ted any curren                         | t officer, director                      | , or trustee.  |
|--|--|--|-----------------------|-----------------------------|--------------------------------------|-------------------------------|------------------|--|--|--|
| (A)<br>Name and Title                        | (B) Average hours per week (list any                           | (do n<br>box, i                                  | ot ch<br>unles        | Pos<br>eck<br>s pe<br>d a d | C)<br>Ition<br>more<br>rson<br>irect | than o<br>Is both<br>or/trust | one<br>an<br>ee) | (D) Reportable compensation from       | (E) Reportable compensation from related | (F)<br>Estimated<br>amount of<br>other                                   |
|  | hours for<br>related<br>organizations<br>below dotted<br>line) |  | Institutional trustee | Officer                     | Key employee                         | Highest compensated employee  | Former           | the<br>organization<br>(W-2/1099-MISC) | organizations<br>(W-2/1099-MISC)         | compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) PETER J. BARRIS                          | 1.0  |  |                       |                             |                                      |                               |                  |  |  |  |
| TRUSTEE                                      |  | 1  |                       | _                           | L                                    |                               |                  | 0                                      | 0  | 0  |
| (2) CAROL L. BERNICK                         | 1.0  |  |                       |                             |                                      |                               |                  |  |  |  |
| TRUSTEE                                      |  | 1  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
| (3) CHRISTINE E. BRENNAN                     | 1.0  |  |                       |                             |                                      |                               | 1                | _                                      |  | 0  |
| TRUSTEE                                      |  | <b>/</b>   | <u> </u>              | <u> </u>                    |                                      |                               |                  | 0                                      | 0  | 0  |
| (4) A. STEVEN CROWN                          | 1.0  | _  |                       |                             |                                      |                               |                  |  |  | 0  |
| TRUSTEE                                      |  | 1  | ļ                     | <u> </u>                    | _                                    | ļ                             | _                | 0                                      | 0  | 0  |
| (5) DEBORAH L. DEHAAS                        | 1.0  |  |                       |                             |                                      |                               |                  | 1                                      |  | 0  |
| TRUSTEE                                      |  | 1  | <u> </u>              |                             | _                                    | ļ                             | ļ                | 0                                      | 0  | U  |
| (6) CHARLES W. DOUGLAS                       | 1.0  | ,  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
| TRUSTEE                                      |  | ✓  | ⊢                     | <u> </u>                    | $\vdash$                             | -                             | <del> </del>     | U                                      |  | <u> </u>   |
| (7) D. CAMERON FINDLAY                       | 1.0  | ,  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
| TRUSTEE                                      | 4.0  | <b>✓</b>   | -                     | <u> </u>                    |                                      | -                             | ├                | <u> </u>                               |  |  |
| (8) DENNIS J. FITZSIMONS                     | 1.0  | ,  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
| TRUSTEE                                      |  | 1  | $\vdash$              | -                           |                                      | ├                             | -                |  |  |  |
| (9) T. BONDURANT FRENCH                      | 1.0  | 1  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
| TRUSTEE                                      | 1.0  | \ <u> </u>                                       | ┢                     | ┢                           | ╂                                    | 1                             | ┼                |  | ļ  |  |
| (10) CHRISTOPHER B. GALVIN                   |  | 1  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
| TRUSTEE                                      | 1.0  | -  | $\vdash$              | -                           | -                                    | -                             | ┼                |  |  |  |
| (11) H. PATRICK HACKETT, JR.                 | 1.0  | 1  |                       |                             | 1                                    |                               |                  | 0                                      | 0  | 0  |
| TRUSTEE                                      | 1.0  | •  |                       | ╄╌                          | <del> </del>                         |                               |                  | <del> </del>                           |  |  |
| (12) JAY C. HOAG<br>TRUSTEE                  | 1.0  | 1  |                       |                             |                                      |                               |                  | 0                                      | 0  | 0  |
|  | 1.0  | <del>                                     </del> | $\vdash$              | $\vdash$                    | ╁┈                                   | 1                             | ┪                | <b>-</b>                               |  |  |
| (13) NANCY TRIENENS KAEHLER TRUSTEE          |  | 1  |                       |                             |                                      | 1                             |                  | 1 0                                    | 0  | 0  |
| (14) ELLEN PHILIPS KATZ                      | 1.0  | ╁  | +-                    | $\vdash$                    | -                                    | +                             | $\vdash$         |  | <del> </del>                             |  |
| TRUSTEE                                      |  | 1  |                       |                             | 1                                    |                               |                  | 0                                      | . o                                      | 0  |
| INVOILL                                      |  |  | ٠                     | ٠                           |                                      |                               |                  | <u> </u>                               |  | 000  |

| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) |  |                                   |                       |          |               |                                 |               |                                 |              |                        |   |
|---|--|-----------------------------------|-----------------------|----------|---------------|---------------------------------|---------------|---------------------------------|--------------|------------------------|---|
| (C)   |  |                                   |                       |          |               |                                 |               |                                 |              |                        |   |
| (A)   | (A) (B) Position (D) (E)                             |                                   |                       |          |               |                                 | (E)           |                                 | (F)          |                        |   |
| Name and title  | Average  |                                   |                       |          |               |                                 |               | Reportable                      | Reports      | hle                    | Estimated                                 |
|   | Dox, diffess person is configured inchange inch      |                                   | compensati            |          | amount of     |                                 |               |                                 |              |                        |   |
|   | week (list any                                       |                                   | _                     | ******   | 1             |                                 | <del></del> - | from                            | relate       | ď                      | other                                     |
|   | hours for  | 2,5                               | [ ]                   | Officer  | Key employee  | 哥                               | Former        | the                             | organiza     |                        | compensation                              |
|   | related<br>organizations                             | 중찰                                | 8                     | Ř        | 9             | \§ §                            | 즆             | organization<br>(W-2/1099-MISC) | (W-2/1099-   | MISC)                  | from the                                  |
|   | below dotted   | 한                                 | 휥                     |          | 무             | _ <u>a</u> 8                    | ĺ             | 1(11-27 1000-141130)            |              |                        | organization<br>and related               |
|   | line)  | Individual trustee<br>or director | Institutional trustee |          | 8             | 뒇                               |               |                                 | İ            |                        | organizations                             |
|   |  | 8                                 | SE                    |          |               | , <del>2</del>                  |               |                                 |              |                        |   |
|   | 1  |                                   | ē                     |          |               | Highest compensated<br>employee |               |                                 |              |                        |   |
| (15) HARRELD N. KIRKPATRICK III   | 1.0  |                                   | $\vdash$              |          | -             | _                               | _             |                                 |              |                        |   |
| TRUSTEE   | <del> </del>   | 1                                 |                       |          |               |                                 |               |                                 |              |                        |   |
| (16) LESTER B. KNIGHT   | 4.0  |                                   |                       |          |               |                                 | _             | 0                               |              | 0                      | 0   |
|   | 1.0  |                                   | 1                     |          |               |                                 |               |                                 |              |                        |   |
| TRUSTEE   |  | <b>/</b>                          |                       |          |               |                                 |               | 0                               |              | 0                      | 0   |
| (17) J. LANDIS MARTIN   | 1.0  |                                   |                       |          |               |                                 |               |                                 |              |                        |   |
| TRUSTEE   |  | <b>V</b>                          |                       |          |               |                                 |               | o                               |              | oĺ                     | 0   |
| (18) WENDY M. NELSON  | 1.0  |                                   | - 1                   |          |               |                                 |               |                                 |              |                        |   |
| TRUSTEE   |  | 1                                 |                       |          |               |                                 |               | 0                               |              | ٦                      |   |
| (19) WILLIAM A. OSBORN  | 4.0  | · ·                               | $\rightarrow$         |          |               |                                 | <u> </u>      | 0                               |              | 0                      | 0   |
|   | 1.0  | .                                 |                       |          |               |                                 |               |                                 |              | 1                      |   |
| TRUSTEE   |  | <b>✓</b>                          |                       |          |               |                                 |               | 0                               |              | 0                      | 0   |
| (20) JANE DIRENZO PIGOTT  | 1.0  |                                   | - 1                   |          |               |                                 |               |                                 |              | Ï                      |   |
| TRUSTEE   |  | ✓                                 | - 1                   |          |               |                                 |               | 0                               |              | 0                      | 0   |
| (21) J.B. PRITZKER  | 1.0  |                                   | $\neg$                | $\neg$   |               |                                 |               |                                 |              |                        |   |
| TRUSTEE   |  | 1                                 | - 1                   | ſ        | ı             |                                 |               | o                               |              | o                      |   |
| (22) KIMBERLY QUERREY   | 1.0  |                                   | -1                    |          |               |                                 |               |                                 |              |                        | 0   |
| TRUSTEE   | 1.0  | ,                                 |                       | ı        |               |                                 |               |                                 |              |                        |   |
|   |  | ✓                                 |                       |          |               |                                 |               | 0                               |              | 0                      | 0   |
| (23) M. JUDE REYES  | 1.0  |                                   |                       |          |               |                                 |               |                                 |              |                        |   |
| TRUSTEE   |  | <b>✓</b>                          |                       |          | ı             |                                 |               | 0                               |              | 0                      | 0   |
| (24) PATRICK G. RYAN, JR.   | 1.0  |                                   |                       |          |               |                                 | $\neg$        |                                 |              |                        |   |
| TRUSTEE   |  | <b>✓</b>                          | ĺ                     |          | -             |                                 | İ             | 0                               |              | 0                      | 0   |
| (25) (SEE STATEMENT)  |  |                                   |                       | $\dashv$ | -             |                                 |               |                                 |              | -                      |   |
|   |  |                                   |                       |          | Ī             | 1                               |               |                                 |              |                        |   |
| 1b Sub-total  |  | 1                                 |                       |          |               |                                 |               |                                 |              |                        |   |
|   |  | ٠. ٠                              | •                     | • •      | •             | . !                             |               | 0                               |              | 0                      | 0   |
| c Total from continuation sheets to Part  |  |                                   | •                     |          | •             | . 1                             | ▶             | 25,943,639                      |              | 0                      | 3,018,803                                 |
| d Total (add lines 1b and 1c)   |  |                                   |                       |          |               | <u>. l</u>                      | <b>&gt;</b>   | 25,943,639                      |              | 0                      | 3,018,803                                 |
| 2 Total number of individuals (including but  | not limited  | to the                            | ose                   | liste    | ed a          | bove                            | ) wh          | no received mo                  | re than \$1  | 00.00                  | 0 of                                      |
| reportable compensation from the organization   | zation 🟲   |                                   |                       |          |               |                                 | ,             | 2,660                           |              | ,                      |   |
|   |  |                                   |                       |          |               |                                 |               | 2,000                           | ****         |                        |   |
| 3 Did the organization list any former off  | icer direct  | Or O                              | tru                   | ıeta     | _ L           | (6)/ 6                          | mni           | ovec or high                    | et compo     | nonto                  | Yes No                                    |
| employee on line 1a? If "Yes," complete S   | chedule L  | יון, טו<br>לחב פון                | nu<br>chii            | ndů      | e, r          | al<br>al                        | mþi           | oyee, or night                  | ast compe    | ii isat <del>o</del> i | ANALOMATRONIA PROPERTIES DE TRANSPORTANTE |
|   |  |                                   |                       |          |               |                                 | •             |                                 |              |                        | 3 ✓                                       |
| 4 For any individual listed on line 1a, is the  | sum of rep   | ortab                             | le c                  | om       | pen           | satio                           | n an          | id other comp                   | ensation fr  | om th                  | e   |
| organization and related organizations  | greater tha  | n \$18                            | 50,0                  | 0007     | ? //          | "Yes                            | ," c          | complete Sche                   | edule J fo   | r suci                 | h   |
| individual  |  |                                   |                       |          |               |                                 |               |                                 |              |                        | 4 🗸                                       |
| 5 Did any person listed on line 1a receive or   | accrue co  | mpen                              | satio                 | on f     | ron           | n anv                           | unr           | elated organiza                 | ation or inc | dividus                | 1   |
| for services rendered to the organization?  | If "Yes." co   | omple                             | te S                  | Sche     | du            | le J fo                         | ) F St        | uch person                      |              |                        |   |
| Section B. Independent Contractors  |  |                                   |                       |          |               |                                 |               | poiooii ,                       |              |                        | 5 /                                       |
|   |  |                                   |                       | 1        |               |                                 |               |                                 |              |                        |   |
|   | ompensate  | a inae                            | ∍peı                  | nae      | nt c          | ontra                           | cto           | rs that received                | more tha     | ın \$100               | 0,000 of                                  |
| compensation from the organization. Rep   | ou combeu  | satior                            | 1 TOI                 | rtne     | e ca          | lenda                           | ır ye         | ear ending with                 | or within    | the org                | janization's tax                          |
| year.   |  |                                   |                       |          |               |                                 |               |                                 |              |                        |   |
| (A)   |  |                                   |                       |          |               |                                 |               | (B)                             |              |                        | (C)                                       |
| Name and business addr  | 988  |                                   |                       |          |               |                                 |               | Description of ser              | rvices       |                        | Compensation                              |
| THE FAMILY INSTITUTE, 618 LIBRARY PL EVANSTO  | THE FAMILY INSTITUTE CARLIDDADY DI FYANCTON II COOCA |                                   |                       |          |               |                                 |               |                                 |              |                        |   |
| JENNER & BLOCK LLP, 353 NORTH CLARK STREET  |  |                                   | 3E.4                  |          |               | $\overline{}$                   |               |                                 | VICES        |                        | 12,517,834                                |
|   |  |                                   |                       |          |               | _                               |               | AL SERVICES                     |              |                        | 5,736,987                                 |
|   |  |                                   |                       |          | 4,356,499     |                                 |               |                                 |              |                        |   |
| REALTERM GLOBAL LLC, 201 WEST STREET, ANNAPOLIS, MD 21401 INVESTMENT MANAGEMENT 3,938,977                       |  |                                   |                       |          | 3,938,977     |                                 |               |                                 |              |                        |   |
| HURON CONSULTING GROUP LLC, 550 W VAN BUR   | REN STREET   | , CHI                             | CAG                   | 0, 1     | L 60          | 607                             | CON           | SULTING SER                     | /ICES        |                        | 3,556,034                                 |
| 2 Total number of independent contractor  | s (including   | g but                             | not                   | t lir    | nite          | d to                            | tho           | se listed abov                  | /e) who      |                        |   |
| received more than \$100,000 of compensa  | tion from th   | e org                             | aniz                  | atio     | n <b>&gt;</b> | •                               |               | 553                             |              |                        |   |

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Form 990 (2017)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (D) Revenue excluded from tax (C) Unrelated business revenue (A) Total revenue exempt function revenue under sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns . . 1a Membership dues . . . 1b 2,730,314 Fundraising events . . . . 10 C Related organizations . . . 1d 34,165,247 Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 336,828,684 70,480,723 Noncash contributions included in lines 1a-1f: \$ 373,724,245 Total, Add lines 1a-1f . h **Business Code** Program Service Revenue 1.071.401.610 611310 1,071,401,610 2a TUITION AND FEES 613,843,760 613,843,760 611310 RESEARCH ACTIVITIES 185,464,515 185,464,515 611310 **EDUCATIONAL ACTIVITIES** C 83,906,819 83,906,819 611310 d AUXILIARY ENTERPRISES 38,448,347 611310 38,448,347 MEDICAL ACTIVITIES O 611310 7,999,936 7,999,936 0 All other program service revenue. 2,001,064,987 Total, Add lines 2a-2f. Investment income (including dividends, interest, 76,968,825 83,016,433 3,952,279 2,095,329 and other similar amounts) . . . . . Income from investment of tax-exempt bond proceeds ▶ 4 9,593,271 907,101 10,500,372 Royalties . (I) Real (II) Personal 3,763,062 6a Gross rents . . 951,878 b Less: rental expenses 0 2,811,184 c Rental income or (loss) 2,811,184 2,811,184 d Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory 1,473,401,131 713,254,826 b Less: cost or other basis and sales expenses . 822,080,082 673,052,621 651,321,049 40.202.205 Gain or (loss) . 691,523,254 691,523,254 Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ 2,730,314 of contributions reported on line 1c). See Part IV, line 18 . . . . . 789,898 639,071 b Less: direct expenses . . . . 150,827 150,827 c Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 . . . . . a b Less: direct expenses . . . . b c Net income or (loss) from gaming activities . . 10a Gross sales of inventory, less returns and allowances . . . b Less: cost of goods sold . . . b Net income or (loss) from sales of inventory . Miscellaneous Revenue **Business Code** (25,102,567) 523920 (25,102,567) INVESTMENT IN LPS 11a 4,927,268 4,927,268 812930 PARKING FACILITIES 924,601 924,601 541990 SCIENTIFIC SERVICES/RENTAL 247,141 0 247,141 0 d All other revenue . . (19,003,557) e Total. Add lines 11a-11d . 781,047,361 (16,001,127) 2,005,017,266 3,143,787,745 Total revenue. See instructions.

## Part IX Statement of Functional Expenses

| Secti         | ion 501(c)(3) and 501(c)(4) organizations must con  | nplete all columns. A  | VII other organization                | ns must complete colu               | mn (A)                         |
|---------------|---|------------------------|---------------------------------------|-------------------------------------|--------------------------------|
|               | Check if Schedule O contains a respon   | ise or note to any lii | ne in this Part IX                    |                                     | (- 9.                          |
| Do n<br>8b, 9 | ot include amounts reported on lines 6b, 7b,<br>b, and 10b of Part VIII.  | (A)<br>Total expenses  | (B) Program service expenses          | (C) Management and general expenses | (D)<br>Fundralsing<br>expenses |
| 1             | Grants and other assistance to domestic organizations   |                        |                                       | 9                                   |                                |
|               | and domestic governments. See Part IV, line 21  | 75,011,143             | 75,011,143                            |                                     |                                |
| 2             | Grants and other assistance to domestic   |                        |                                       |                                     |                                |
|               | individuals. See Part IV, line 22   | 448,999,442            | 448,999,442                           |                                     |                                |
| 3             | Grants and other assistance to foreign  |                        |                                       |                                     |                                |
|               | organizations, foreign governments, and foreign   |                        |                                       |                                     |                                |
|               | individuals. See Part IV, lines 15 and 16   | 4,819,035              | 4,819,035                             |                                     |                                |
| 4             | Benefits paid to or for members   |                        |                                       |                                     |                                |
| 5             | Compensation of current officers, directors,  |                        |                                       |                                     |                                |
| _             | trustees, and key employees   | 21,252,276             | 5,395,932                             | 14,716,665                          | 1,139,679                      |
| 6             | Compensation not included above, to disqualified  |                        |                                       |                                     |                                |
|               | persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  |                        | i                                     |                                     |                                |
| 7             | <u>.</u>  | 176,441                |                                       | 176,441                             |                                |
| 7<br>8        | Other salaries and wages  | 1,126,781,559          | 1,053,180,309                         | 38,740,585                          | 34,860,665                     |
| ·             | section 401(k) and 403(b) employer contributions)   | 04.054.055             |                                       | ŀ                                   |                                |
| 9             | ** ** **  | 81,951,082             | 75,701,241                            | 3,447,113                           | 2,802,728                      |
| 10            | Other employee benefits   | 121,503,192            | 112,128,430                           | 5,170,669                           | 4,204,093                      |
| 11            | Payroll taxes   | 68,866,060             | 63,657,859                            | 2,872,594                           | 2,335,607                      |
| ''a           | Management  | 1                      |                                       |                                     |                                |
| b             | Legal   | 44 224 550             | · · · · · · · · · · · · · · · · · · · | 11.001.550                          |                                |
| c             | Accounting  | 14,331,559             |                                       | 14,331,559                          |                                |
| ď             | Lobbying  | 1,453,718              |                                       | 1,453,718                           |                                |
| e             | Professional fundraising services. See Part IV, line 17   | 505,262<br>424,469     |                                       | 505,262                             | 40.1.400                       |
| ī             | Investment management fees  | 50,682,840             |                                       | E0 602 040                          | 424,469                        |
| g             | Other. (If line 11g amount exceeds 10% of line 25, column   | 30,002,040             |                                       | 50,682,840                          |                                |
| Ŭ             | (A) amount, list line 11g expenses on Schedule O.)  | 212,818,349            | 202,487,854                           | 0.000.972                           | 4 220 622                      |
| 12            | Advertising and promotion   | 26,368,768             | 17,363,109                            | 9,099,873<br>2,112,669              | 1,230,622                      |
| 13            | Office expenses   | 165,732,310            | 159,172,372                           | 3,151,695                           | 6,892,990<br>3,408,243         |
| 14            | Information technology  | 44,270,427             | 42,323,930                            | 1,077,496                           | 3,408,243<br>869,001           |
| 15            | Royalties   | 7,246,544              | 7,241,101                             | 5,443                               | 1 00,600                       |
| 16            | Occupancy   | 140,803,700            | 136,317,647                           | 3,801,198                           | 684,855                        |
| 17            | Travel  | 53,440,003             | 51,191,965                            | 678,170                             | 1,569,868                      |
| 18            | Payments of travel or entertainment expenses  |                        | 21,101,000                            | 0,0,1,0                             | 1,309,000                      |
|               | for any federal, state, or local public officials   |                        |                                       |                                     |                                |
| 19            | Conferences, conventions, and meetings .  | 37,144,330             | 35,493,073                            | 999,673                             | 651,584                        |
| 20            | Interest  | 68,648,085             |                                       | 68,648,085                          |                                |
| 21            | Payments to affiliates  |                        |                                       |                                     |                                |
| 22            | Depreciation, depletion, and amortization .   | 150,731,967            | 140,797,588                           | 8,718,544                           | 1,215,835                      |
| 23            | Insurance   |                        |                                       |                                     |                                |
| 24            | Other expenses. Itemize expenses not covered  |                        |                                       |                                     |                                |
|               | above (List miscellaneous expenses in line 24e. If  |                        |                                       |                                     |                                |
|               | line 24e amount exceeds 10% of line 25, column  |                        |                                       |                                     |                                |
|               | (A) amount, list line 24e expenses on Schedule O.)  |                        |                                       |                                     |                                |
| а             |   |                        |                                       |                                     |                                |
| ь             |   |                        |                                       |                                     |                                |
| C             |   |                        |                                       |                                     |                                |
| d             | All the   |                        |                                       |                                     |                                |
| e             | All other expenses  | 33,684,307             | 28,067,969                            | 5,082,385                           | 533,953                        |
| 25            | Total functional expenses, Add lines 1 through 24e  | 2,957,646,868          | 2,659,349,999                         | 235,472,677                         | 62,824,192                     |
| 26            | Joint costs. Complete this line only if the organization reported in column (B) joint costs   |                        |                                       |                                     |                                |
|               | from a combined educational campaign and  |                        |                                       |                                     |                                |
|               | fundraising solicitation. Check here    if following SOP 98-2 (ASC 958-720)   if following SOP 98-2 (ASC 95 |                        |                                       |                                     |                                |
|               |   | I                      | 1                                     | 1                                   |                                |

| P                           | art X | Balance Sheet   |                 |                        |   |     |                        |
|-----------------------------|-------|---|-----------------|------------------------|---|-----|------------------------|
|                             |       | Check if Schedule O contains a response or  | note            | to any line in this Pa |   |     |                        |
|                             |       |   |                 |                        | (A)<br>Beginning of year  |     | (B)<br>End of year     |
|                             | 1     | Cash-non-interest-bearing   |                 | · · · · · · ·          |   | 1   | 000 040 040            |
|                             | 2     | Savings and temporary cash investments  | 299,641,547     | 2                      | 269,243,813   |     |                        |
|                             | 3     | Piedges and grants receivable, net  | 318,780,000     | 3                      | 311,458,000   |     |                        |
|                             | 4     | Accounts receivable, net  |                 |                        | 263,424,491   | 4   | 273,953,767            |
|                             | 5     | Loans and other receivables from current and  | 2.202           |                        |   |     |                        |
|                             |       | trustees, key employees, and highest co   |                 |                        |   |     |                        |
|                             |       | Complete Part II of Schedule L  |                 |                        | 686,667   | 5   | 493,333                |
| S                           | 6     | Loans and other receivables from other disqualified pers<br>4958(f)(1)), persons described in section 4958(c)(3)(B), ar<br>sponsoring organizations of section 501(c)(9) volun-<br>organizations (see instructions). Complete Part II of Sche | 0               | 6                      | 0   |     |                        |
| šet                         | 7     | Notes and loans receivable, net   |                 |                        | 150,992,629   | 7   | 151,173,126            |
| Assets                      | 8     | Inventories for sale or use   |                 |                        | 2,707,272   | 8   | 2,658,715              |
| `                           | 9     |   |                 |                        | 15,092,926  | 9   | 9,382,570              |
|                             | 10a   | Land, buildings, and equipment: cost or   | · ·             | 1                      | 10,002,020  | -   | ,,,,                   |
|                             | 104   | other basis. Complete Part VI of Schedule D   | 10a             | 5,073,611,914          |   |     |                        |
|                             | b     | Less: accumulated depreciation  | 10b             |                        | 2,933,678,917   | 10c | 3,258,034,625          |
|                             | 11    | •   |                 | 1,010,017,200          | 1,970,556,838   | 11  | 1,859,646,588          |
|                             | 12    | Investments—publicly traded securities  Investments—other securities. See Part IV, line   |                 |                        | 8,529,796,793   | 12  | 9,333,297,024          |
|                             | 13    | Investments—program-related. See Part IV, line  |                 |                        | 0,020,100,100   | 13  | 0,000,201,000          |
|                             | 14    | Intangible assets   |                 |                        |   | 14  |                        |
|                             | 15    | Other assets. See Part IV, line 11  | 172,627         | 15                     | 10,184  |     |                        |
|                             | 16    | Total assets. Add lines 1 through 15 (must equal  |                 |                        | 14,485,530,707  | 16  | 15,469,351,745         |
|                             | 17    | Accounts payable and accrued expenses   |                 |                        | 364,108,195   | 17  | 191,220,386            |
|                             | 18    | Grants payable  |                 |                        | 00-1,100,100  | 18  | 101,220,000            |
|                             | 19    | Deferred revenue  | 277,852,598     | 19                     | 302,708,944   |     |                        |
|                             | 20    | Tax-exempt bond liabilities   |                 |                        | 403,323,182   | 20  | 399,636,291            |
|                             | 21    | Escrow or custodial account liability. Complete   |                 |                        | 100,020,102   | 21  | 300,000,207            |
| <b>(5)</b>                  |       | Loans and other payables to current and for   |                 |                        |   |     |                        |
| Liabilities                 | 22    | trustees, key employees, highest compen   |                 |                        |   |     |                        |
| i                           |       | disqualified persons. Complete Part II of Schedu  |                 |                        | 0   | 22  | 0                      |
| ia                          | 23    | Secured mortgages and notes payable to unrela   |                 |                        | 175,669,948   | 23  | 283,197,471            |
| _                           | 24    | Unsecured notes and loans payable to unrelated  |                 |                        | 110,000,010   | 24  | 200,101,111            |
|                             |       | Other liabilities (including federal income tax,  |                 |                        |   |     |                        |
|                             | 25    | parties, and other liabilities not included on lines  | paya.<br>: 17-2 | 4) Complete Part X     |   |     |                        |
|                             |       | of Schedule D   |                 |                        | 1,583,608,761   | 25  | 2,050,818,753          |
|                             | 26    |   |                 |                        | 2,804,562,684   |     | 3,227,581,845          |
| _                           | 20    | Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958  | ), che          | ck here ▶ 🗸 and        | CONTRACTOR AND AND CONTRACTOR AND AND AND AND AND AND AND AND AND AND |     |                        |
| 8                           |       | complete lines 27 through 29, and lines 33 an   |                 |                        |   |     |                        |
| 2                           | 27    | Unrestricted net assets   |                 |                        | 7,336,442,023   | 27  | 7,652,598,900          |
| ala                         | 28    | Temporarily restricted net assets   |                 |                        | 2,720,408,000   | 28  | 2,887,890,000          |
| 9 1                         | 29    | Permanently restricted net assets   |                 |                        | 1,624,118,000   | 29  | 1,701,281,000          |
| Š                           | 23    | Organizations that do not follow SFAS 117 (ASC 9  |                 |                        |   |     |                        |
| 7                           |       | complete lines 30 through 34.   | ,,              |                        |   |     |                        |
| S                           | 30    | Capital stock or trust principal, or current funds  |                 |                        |   | 30  |                        |
| Set                         | 31    | Pald-in or capital surplus, or land, building, or ea  |                 |                        |   | 31  |                        |
| AS                          | 32    | Retained earnings, endowment, accumulated in  |                 |                        |   | 32  |                        |
| Net Assets or Fund Balances | 33    | Total net assets or fund balances   |                 |                        | 11,680,968,023  | 33  | 12,241,769,900         |
| Z                           | 34    | Total liabilities and net assets/fund balances .  |                 |                        | 14,485,530,707  | 34  | 15,469,351,745         |
|                             |       | 1 and the distance of the transported letter water (and   |                 |                        |   |     | Form <b>990</b> (2017) |

| D    | 4 |   |
|------|---|---|
| PAGA |   | • |

| Par        | XI Reconciliation of Net Assets   | 717        |                        |
|------------|---|------------|------------------------|
|            | Check if Schedule O contains a response or note to any line in this Part XI   |            | 🗸                      |
| 1          | Total revenue (must equal Part VIII, column (A), line 12)   | 1          | 3,143,787,745          |
| 2          | Total expenses (must equal Part IX, column (A), line 25)  | 2          | 2,957,646,868          |
| 3          | Revenue less expenses. Subtract line 2 from line 1  | 3          | 186,140,877            |
| 4          | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   | 4          | 11,680,968,023         |
| 5          | Net unrealized gains (losses) on investments  | 5          | 368,628,000            |
| 6          | Donated services and use of facilities  | 6          |                        |
| 7          | Investment expenses   | 7          |                        |
| 8          | Prior period adjustments  | 8          |                        |
| 9          | Other changes in net assets or fund balances (explain in Schedule O)  | 9          | 6,033,000              |
| 10         | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line  |            |                        |
|            | 33, column (B))   | 10         | 12,241,769,900         |
| Part       | XII Financial Statements and Reporting  |            |                        |
|            | Check if Schedule O contains a response or note to any line in this Part XII  | <u></u>    | <u> </u>               |
| 1          | Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," expected to the control of | olain in   | Yes No                 |
| <b>2</b> a |   |            | 2a 🗸                   |
| b          | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  | <br>d on a | 2b 🗸                   |
| С          | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ow of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, expended to the control of the  | ntant?     | 2c ✓                   |
| 3a         | As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?   |            | 3a ✓                   |
| b          | If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au  | go the     | 3b 🗸                   |
|            |   |            | Form <b>990</b> (2017) |

| Bullet   B   | (A) Name and Title     | (A) Name and Title (B) Average hours per week                |                                |          | C) Po    | sitior       | ך<br>ply)           |  | (D) Reportable compensation | (E) Reportable<br>compensation | (F) Estimated amount of other                |
|--|------------------------|--|--------------------------------|----------|----------|--------------|---------------------|--|-----------------------------|--------------------------------|--|
| TRUSTEE (26) MINEER A. SAITER 1.0  |                        | (list any hours for related organizations below dotted line) | Individual trustee or director |          |          |              | Highest compensated | Former   | from the<br>organization    | from related organizations     | compensation<br>from the<br>organization and |
| CES   MUNEER A SATTER  |                        | 1.0  | ✓                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| TRUSTEE (27) ANDREWE, SENYEI, MD 1.0 TRUSTEE (28) MICHAEL S, SHANNON 1.0 TRUSTEE (29) BENJAMIN W, SLIVKA 1.0 TRUSTEE (29) ENIAMIN W, SLIVKA 1.0 TRUSTEE (21) CHARLES A, TRIBBETT III 1.0 TRUSTEE (21) CHARLES A, TRIBBETT III 1.0 TRUSTEE (23) FEFEDERICK H, WADDELL 1.0 TRUSTEE (24) DAVID B, WEINBERG 1.0 TRUSTEE (25) MICHAEL S, WILSON 1.0 TRUSTEE (26) MICHAEL S, WILSON 1.0 TRUSTEE (27) MORTON O, SCHAPIRO 40.0 TRUSTEE (29) MORTON O, SCHAPIRO 40.0 TRUSTEE (27) MORTON O, SCHAPIRO 40.0 TRUSTEE (27) MORTON O, SCHAPIRO 40.0 TRUSTEE (28) MICHAEL S, WILSON 1.0 TRUSTEE (29) MICHAEL S, WILSON 1.0 TRUSTEE (29) MICHAEL S, WILSON 1.0 TRUSTEE (29) MARY L, WILSON 1.0 TRUSTEE (29) MORTON O, SCHAPIRO 40.0 TRUSTEE (20) MORTON O, SCHAPIRO 40.0 TRUSTEE (27) MORTON O, SCHAPIRO 40.0 TRUSTEE (28) JONATHAN HOLLOWAY 40.0 TRUSTEE (29) MICHAEL S, BEEMER 40.0 TRUSTEE (39) MORTON O, SCHAPIRO 415,663 TRUSTEE (40) PAMEL S, BEEMER 40.0 TRUSTEE (41) PAUL CASTELLUCCI 40.0 TRUSTES (42) PAUL CASTELLUCCI 40.0 TRUSTES (43) MURAN CHINNINA 40.0 TRUSTES (44) PAUL CASTELLUCCI 40.0 TRUSTES (45) PAUL CASTELLUCCI 40.0 TRUSTES (46) PAUL CASTELLUCCI 40.0 TRUSTES (47) PAUL CASTELLUCCI 40.0 TRUSTES (48) MURAN CHINNINA 40.0 TRUSTES (49) PAUL CASTELLUCCI 40.0 TRUSTES (40) PAUL CASTELLUCCI 40.0 TRUSTES (41) PAUL CASTELLUCCI 40.0 TRUSTES (42) PAUL CASTELLUCCI 40.0 TRUSTES (43) PAUL CASTELLUCCI 40.0 TRUSTES (44) PAUL CASTELLUCCI 40.0 TRUSTES (45) PAUL CASTELLUCCI 40.0 TRUSTES (46) PAUL CASTELLUCCI 40.0 TRUSTES (47) PAUL CASTELLUCCI 40.0 TRUSTES (48) PAUL CASTELLUCCI 40.0 TRUSTES (48) PAUL CASTELLUCCI 40.0 TRUSTES (49) PAUL CASTELLUCCI 40.0 TRUSTES (40) PAUL CASTELLUCCI 40.0 TRUSTES (41) PAUL CASTELLUCCI 40.0 TRUSTES (42) PAUL CASTELLUCCI 40.0 TRUSTES (43) PAUL CASTELLUCCI 40.0 TRUSTES (44) PAUL CASTELLUCCI 40.0 TRUSTES (45) PAUL CASTELLUCCI 40.0 TRUSTES (47) PAUL  |                        | 1.0  |                                |          |          |              |                     |  |                             |                                |  |
| 27) ANDREW E. SENYEI, MD   |                        |  | ✓                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| TRUSTEE (28) MICHAEL S. SHANNON 1.0  |                        | 1.0  |                                |          |          |              |                     |  |                             |                                |  |
| 28) MICHAEL S. SHANNON   |                        |  | ✓                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| TRUSTEE  (29) BENJAMIN W. SLIVKA  1.0  |                        | 1.0  |                                |          |          |              |                     |  |                             | 0                              | o  |
| TRUSTEE  (30) TIMOTHY P. SULLIVAN  1.0  TRUSTEE  (31) CHARLES A. TRIBBETT III  1.0  TRUSTEE  (32) JEFFREY W. UBBEN  1.0  TRUSTEE  (33) FREDERICK H. WADDELL  TRUSTEE  (34) DAVID B. WEINBERG  1.0  TRUSTEE  (35) MILES D. WHITE  (36) STEPHEN R. WILSON  TRUSTEE  (36) STEPHEN R. WILSON  TRUSTEE  (37) MORTON O. SCHAPIRO  PRESIDENT  (38) JONATHAN HOLLOWAY  PRESIDENT  (39) MARY L. BAGLIVO  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER  40.0  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  40.0  TRUSTEE  (40) 396,273  0  0  0  0  0  0  0  0  0  0  0  0  0  | TRUSTEE                |  | <b>V</b>                       |          |          |              |                     |  | U                           | · ·                            |  |
| TRUSTEE  (a0) TIMOTHY P. SULLIVAN  1.0  TRUSTEE  (31) CHARLES A. TRIBBETT III  1.0  TRUSTEE  (32) JEFFREY W. UBBEN  1.0  TRUSTEE  (33) FREDERICK H. WADDELL  1.0  TRUSTEE  (34) DAVID B. WEINBERG  1.0  TRUSTEE  (34) DAVID B. WEINBERG  1.0  TRUSTEE  (35) MILES D. WHITE  1.0  TRUSTEE  (36) STEPHEN R. WILSON  1.0  TRUSTEE  (37) MORTON O. SCHAPIRO  PRESIDENT  (38) JANATHAN HOLLOWAY  40.0  PROVOST  (39) MARY L. BAGLIVO  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER  40.0  VP FOR HUMAN RESOURCES  (41) PAUL CASTELLUCCI  40.0  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  40.0  TRUSTEE  (40) TRUSTEE  (41) PAUL CASTELLUCCI  40.0  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  40.0  TRUSTES  (42) NIMALAN CHINNIAH  40.0  TRUSTES  (43) JONATHAN HOLLOWAY  40.0  JONATHAN HOLLOWA |                        | 1.0  | 1                              |          |          |              |                     |  | o                           | 0                              | o  |
| TRUSTEE (31) CHARLES A. TRIBBETT III 1.0  TRUSTEE (32) JEFFREY W. UBBEN 1.0  TRUSTEE (33) FREDERICK H. WADDELL 1.0  TRUSTEE (34) DAVID B. WEINBERG 1.0  TRUSTEE (35) MILES D. WHITE 1.0  TRUSTEE (36) MILES D. WHITE 1.0  TRUSTEE (37) MORTON O. SCHAPIRO 40.0  TRUSTEE (37) MORTON O. SCHAPIRO 40.0  PRESIDENT (38) JONATHAN HOLLOWAY 40.0  PROVOST (39) MARY L. BAGLIVO 40.0  VP GLOBAL MARKETING (40) PAMELA S. BEEMER 40.0  VP FOR HUMAN RESOURCES (41) PAUL CASTELLUCCI 40.0  VP BUDGET AND PLANNING (42) NIMALAN CHINNIAH 40.0  LECUTIVE VICE PRESIDENT (42) MARAN CHINNIAH 40.0  TRUSTEE (43) MARAN CHINNIAH 40.0  TRUSTEE (44) PAUL CASTELLUCCI 40.0  TRUSTEE (45) MARAN CHINNIAH 40.0  TRUSTEE (47) NIMALAN CHINNIAH 40.0  TRUSTEE (48) STEPHEN R. WILSON 1,590,081  TRUSTEE (49) ART L. BAGLIVO TRUSTEE (40) ART L. BAGLIVO TRUSTEE (41) PAUL CASTELLUCCI TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (42) NIMALAN CHINNIAH 40.0  TRUSTEE (43) NIMALAN CHINNIAH 40.0  TRUSTEE (44) NIMALAN CHINNIAH 40.0  TRUSTEE (45) JEMEN CON CON CON CON CON CON CON CON CON CO  | TRUSTEE                |  | <u> </u>                       |          |          |              |                     |  | _                           |                                |  |
| [31] CHARLES A. TRIBBETT III   |                        | 1.0  | 1                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| TRUSTEE (32) JEFFREY W. UBBEN 1.0  TRUSTEE (33) FREDERICK H. WADDELL 1.0  TRUSTEE (34) DAVID B. WEINBERG 1.0  TRUSTEE (35) MILES D. WHITE 1.0  TRUSTEE (36) STEPHEN R. WILSON 1.0  TRUSTEE (37) MORTON O. SCHAPIRO 40.0  PRESIDENT (39) JONATHAN HOLLOWAY 40.0  PROVOST (39) MARY L. BAGLIVO 40.0  VP GLOBAL MARKETING (40) PAMELA S. BEEMER 40.0  VP FOR HUMAN RESOURCES (41) PAUL CASTELLUCCI 40.0  VP BUDGET AND PLANNING (42) NIMALAN CHINNIAH 40.0  1.0  1.0  0  0  0  0  0  1.0  1.0   |                        | 4.0  | _                              |          |          |              | <u> </u>            |  |                             |                                |  |
| (32) JEFFREY W. UBBEN       1.0       ✓       0       0         TRUSTEE       (33) FREDERICK H. WADDELL       1.0       ✓       0       0         TRUSTEE       (34) DAVID B. WEINBERG       1.0       ✓       0       0       0         TRUSTEE       (35) MILES D. WHITE       1.0       ✓       0   |                        |  | ✓                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| TRUSTEE  (33) FREDERICK H. WADDELL  TRUSTEE  (34) DAVID B. WEINBERG  TRUSTEE  (35) MILES D. WHITE  TRUSTEE  (36) STEPHEN R. WILSON  TRUSTEE  (37) MORTON O. SCHAPIRO  PRESIDENT  (38) JONATHAN HOLLOWAY  PROVOST  (39) MARY L. BAGLIVO  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER  40.0  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  40.0  V 1,016,844  0  0  0  0  0  0  1.0  1.0  0  0  1.590,081  0  4.5  0  0  4.5  0  0  0  0  1.590,081  0  4.5  0  4.5  0  4.5  4.5  4.5  4.5   |                        | 10   |                                |          |          |              |                     |  |                             |                                |  |
| (33) FREDERICK H. WADDELL 1.0  |                        |  | ✓                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| TRUSTEE  (34) DAVID B. WEINBERG TRUSTEE  (35) MILES D. WHITE TRUSTEE  (36) STEPHEN R. WILSON TRUSTEE  (37) MORTON O. SCHAPIRO PRESIDENT  (38) JONATHAN HOLLOWAY PROVOST  (39) MARY L. BAGLIVO VP GLOBAL MARKETING  (40) PAMELA S. BEEMER VD FOR HUMAN RESOURCES  (41) PAUL CASTELLUCCI VP BUDGET AND PLANNING (42) NIMALAN CHINNIAH VD V COMMENT OF TAX DESCRIPTION  (34) DAMELA S. DECEMBER VD VP GLOBAL MARKETING (42) NIMALAN CHINNIAH VD STEEL VD VP GLOBAL MARKETING (42) NIMALAN CHINNIAH VD STEEL VD VP GLOBAL MARKETING VD STEEL VD S |                        | 1.0  | ,                              |          |          |              |                     |  |                             | •                              |  |
| (34) DAVID B. WEINBERG     1.0       TRUSTEE     0       (35) MILES D. WHITE     1.0       TRUSTEE     0       (36) STEPHEN R. WILSON     1.0       TRUSTEE     0       (37) MORTON O. SCHAPIRO     40.0       PRESIDENT     √       (38) JONATHAN HOLLOWAY     40.0       PROVOST     √       (39) MARY L. BAGLIVO     40.0       VP GLOBAL MARKETING     √       (40) PAMELA S. BEEMER     40.0       VP FOR HUMAN RESOURCES     √       (41) PAUL CASTELLUCCI     40.0       VP BUDGET AND PLANNING     √       (42) NIMALAN CHINNIAH     40.0       EXECUTIVE VICE PRESIDENT     1,016,844       0     0       1.0     0       0     0       0     0       0     1,016,844       0     1   |                        |  | <b>√</b>                       |          |          |              |                     |  | 0                           | υ                              | 0  |
| TRUSTEE       (35) MILES D. WHITE       1.0       ✓       0       0         TRUSTEE       (36) STEPHEN R. WILSON       1.0       ✓       0       0         TRUSTEE       (37) MORTON O. SCHAPIRO       40.0       ✓       1,590,081       0       43         PRESIDENT       (38) JONATHAN HOLLOWAY       40.0       ✓       437,487       0       0         PROVOST       (39) MARY L. BAGLIVO       40.0       ✓       353,652       0       ✓         VP GLOBAL MARKETING       (40) PAMELA S. BEEMER       40.0       ✓       415,663       0         VP FOR HUMAN RESOURCES       (41) PAUL CASTELLUCCI       40.0       ✓       396,273       0         (42) NIMALAN CHINNIAH       40.0       ✓       1,016,844       0       1         (42) NIMALAN CHINNIAH       40.0       ✓       1,016,844       0       1  |                        | 1.0  | /                              |          |          |              |                     |  |                             | o.                             | ٥  |
| TRUSTEE  (36) STEPHEN R. WILSON  TRUSTEE  (37) MORTON O. SCHAPIRO  40.0  PRESIDENT  (38) JONATHAN HOLLOWAY  PROVOST  (39) MARY L. BAGLIVO  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER  40.0  VP FOR HUMAN RESOURCES  (41) PAUL CASTELLUCCI  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  40.0  1.0  0  1,590,081  0  43  45  47  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  487,487  0  40.0  VP GLOBAL MARKETING  40.0  VP BUDGET AND PLANNING  40.0  VP BUDGET AND PLANNING  420,0 MIMALAN CHINNIAH  40.0  1,016,844  0  1.   | TRUSTEE                |  | V                              | .,       |          |              |                     |  | U                           |                                |  |
| (36) STEPHEN R. WILSON       1.0       ✓       0       0         TRUSTEE       (37) MORTON O. SCHAPIRO       40.0       ✓       1,590,081       0       43         PRESIDENT       (38) JONATHAN HOLLOWAY       40.0       ✓       487,487       0       0         PROVOST       (39) MARY L. BAGLIVO       40.0       ✓       353,652       0       0         VP GLOBAL MARKETING       (40) PAMELA S. BEEMER       40.0       ✓       415,663       0         VP FOR HUMAN RESOURCES       (41) PAUL CASTELLUCCI       40.0       ✓       396,273       0         (41) PAUL CASTELLUCCI       40.0       ✓       396,273       0         (42) NIMALAN CHINNIAH       40.0       ✓       1,016,844       0       1         EXECUTIVE VICE PRESIDENT       1       1,016,844       0       1   | (35) MILES D. WHITE    | 1.0  | 1                              |          | }        |              |                     |  | اه                          | 0                              | o  |
| TRUSTEE  (37) MORTON O. SCHAPIRO  40.0  PRESIDENT  (38) JONATHAN HOLLOWAY  PROVOST  (39) MARY L. BAGLIVO  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER  40.0  VP FOR HUMAN RESOURCES  (41) PAUL CASTELLUCCI  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  40.0  1,016,844  0  1,590,081  0  487,487  0 |                        |  | <u> </u>                       |          |          |              |                     |  |                             |                                |  |
| 37) MORTON O. SCHAPIRO   | (36) STEPHEN R. WILSON | 1.0  | 1                              |          |          |              |                     |  | 0                           | 0                              | 0  |
| PRESIDENT   1,590,081   0   4:   |                        | 10.0   | Ĺ                              | -        |          |              | <u> </u>            | -  |                             |                                |  |
| (38) JONATHAN HOLLOWAY 40.0  PROVOST  (39) MARY L. BAGLIVO 40.0  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER 40.0  VP FOR HUMAN RESOURCES  (41) PAUL CASTELLUCCI 40.0  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH 40.0  EXECUTIVE VICE PRESIDENT  40.0  ✓  40.0  ✓  1,016,844  0  1  |                        | 40.0   |                                |          | ✓        |              |                     |  | 1,590,081                   | 0                              | 436,752                                      |
| PROVOST  (39) MARY L. BAGLIVO  VP GLOBAL MARKETING  (40) PAMELA S. BEEMER  VP FOR HUMAN RESOURCES  (41) PAUL CASTELLUCCI  VP BUDGET AND PLANNING  (42) NIMALAN CHINNIAH  EXECUTIVE VICE PRESIDENT   40.0  4  |                        | 40.0   |                                |          |          |              |                     |  |                             |                                |  |
| (39) MARY L. BAGLIVO       40.0       ✓       353,652       0         VP GLOBAL MARKETING       (40) PAMELA S. BEEMER       40.0       ✓       415,663       0         VP FOR HUMAN RESOURCES       (41) PAUL CASTELLUCCI       40.0       ✓       396,273       0         VP BUDGET AND PLANNING       ✓       1,016,844       0       1         EXECUTIVE VICE PRESIDENT       1       1,016,844       0       1   |                        |  |                                |          | ✓        |              |                     |  | 487,487                     | 0                              | 37,421                                       |
| VP GLOBAL MARKETING       ✓       353,652       0         (40) PAMELA S. BEEMER       40.0       ✓       415,663       0         VP FOR HUMAN RESOURCES       (41) PAUL CASTELLUCCI       40.0       ✓       396,273       0         VP BUDGET AND PLANNING       ✓       1,016,844       0       1         EXECUTIVE VICE PRESIDENT       ✓       1,016,844       0       1   |                        | 40.0   |                                |          |          |              | ļ                   | <del>                                     </del> |                             |                                | 40.000                                       |
| (40) PAMELA S. BEEMER       40.0         VP FOR HUMAN RESOURCES         (41) PAUL CASTELLUCCI       40.0         VP BUDGET AND PLANNING         (42) NIMALAN CHINNIAH       40.0         EXECUTIVE VICE PRESIDENT       1,016,844         0       1  |                        |  |                                |          | <b>V</b> |              |                     |  | 353,652                     | 0                              | 48,830                                       |
| VP FOR HUMAN RESOURCES       (41) PAUL CASTELLUCCI       40.0       ✓       396,273       0         VP BUDGET AND PLANNING       ✓       1,016,844       0       1         (42) NIMALAN CHINNIAH       40.0       ✓       1,016,844       0       1         EXECUTIVE VICE PRESIDENT       1 <td></td> <td>40.0</td> <td></td> <td></td> <td>/</td> <td></td> <td></td> <td></td> <td>44E 663</td> <td>0</td> <td>31,658</td>  |                        | 40.0   |                                |          | /        |              |                     |  | 44E 663                     | 0                              | 31,658                                       |
| (41) PAUL CASTELLUCCI       40.0         VP BUDGET AND PLANNING         (42) NIMALAN CHINNIAH       40.0         EXECUTIVE VICE PRESIDENT     40.0  1,016,844 0 1.   | VP FOR HUMAN RESOURCES |  |                                |          | <b>Y</b> | <u> </u>     |                     |  | 415,063                     | U                              | 31,030                                       |
| VP BUDGET AND PLANNING       (42) NIMALAN CHINNIAH     40.0       EXECUTIVE VICE PRESIDENT   |                        | 40.0   |                                |          | 1        |              |                     |  | 396.273                     | o                              | 27,680                                       |
| EXECUTIVE VICE PRESIDENT   |                        |  | <u> </u>                       | <u> </u> | Ľ        |              | <u> </u>            | -  | 500,210                     |                                |  |
| EXECUTIVE VICE PRESIDENT   | (42) NIMALAN CHINNIAH  | 40.0   |                                |          | 1        |              |                     |  | 1,016,844                   | 0                              | 135,296                                      |
| 1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |                        | 40.0   |                                | <u> </u> | <u> </u> | ļ            |                     |  |                             |                                |  |
|  |                        |  |                                |          | ✓        |              |                     |  | 332,215                     | 0                              | 42,834                                       |
| VP UNIVERSITY RELATIONS  (44) JOHN L. D'ANGELO  40.0   |                        | 400  |                                |          |          | <del> </del> | -                   | <del>                                     </del> |                             |                                |  |
| 44) JOHN L. DANGELO  |                        |  |                                |          | 1        |              |                     |  | 566,467                     | 0                              | 50,696                                       |

| (A) Name and Title                 | (B) Average hours<br>per week<br>(list any hours for relatad       |                                | (Ch                   |          | ositio<br>that a | n<br>pply)                   |        | (D) Reportable compensation                 | (E) Reportable compensation                      | (F) Estimated amount of other  |
|------------------------------------|--|--------------------------------|-----------------------|----------|------------------|------------------------------|--------|---|--|--|
|                                    | (list any hours for related<br>organizations below<br>dotted line) | Individual trustee or director | Institutional trustee | Officer  | Key employee     | nignest compensated employee | Former | from the<br>organization<br>(W-2/1099-MISC) | from related<br>organizations<br>(W-2/1099-MISC) | compensation<br>from the<br>organization and<br>related<br>organizations |
| (45) DEVORA GRYNSPAN               | 40.0   |                                |                       | /        |                  |                              |        | 237,207                                     | 0  | 33,809   |
| VP INTERNATIONAL RELATIONS         |  |                                |                       |          |                  | <u> </u>                     |        | 20.,201                                     |  | 00,000   |
| (46) PHILIP L. HARRIS              | 40.0   |                                |                       | 1        |                  |                              |        | 812,892                                     | 0  | 80,966   |
| VP GENERAL COUNSEL                 |  |                                |                       | ,        |                  |                              |        |   |  |  |
| (47) CRAIG A. JOHNSON              | 40.0   |                                |                       | 1        |                  |                              |        | 614,082                                     | 0  | 134,580  |
| INTERIM SENIOR VICE PRESIDENT      |  |                                |                       | ľ        |                  |                              |        |   |  | 10-1,000   |
| (48) MARILYN MCCOY                 | 40.0   |                                |                       | 1        |                  |                              |        | 455,505                                     | 0  | 50,640   |
| VP ADMINISTRATION & PLANNING       |  |                                |                       |          |                  | <u> </u>                     | -      | 100,000                                     |  | 30,040   |
| (49) WILLIAM H. MCLEAN             | 40.0   |                                |                       | /        |                  |                              |        |   | _  |  |
| VP AND CHIEF INVESTMENT<br>OFFICER |  |                                |                       | <b>✓</b> |                  |                              |        | 1,881,386                                   | 0  | 489,296  |
| (50) ROBERT E. MCQUINN             | 40.0   |                                |                       | 1        |                  |                              |        | 913,561                                     | 0  | 220 440  |
| VP FOR DEVELOPMENT                 |  |                                |                       |          |                  |                              |        | 913,301                                     | U  | 226,118  |
| (51) ERIC G. NEILSON               | 30,0   |                                |                       | /        |                  |                              |        | E04 425                                     |  | 00.000   |
| VP MEDICAL AFFAIRS                 |  |                                |                       |          |                  |                              |        | 584,435                                     | 0  | 22,323   |
| (52) JAMES J. PHILLIPS             | 40.0   |                                |                       | 1        |                  |                              |        | 1 004 500                                   |  | 170 170  |
| VP ATHLETICS                       |  |                                |                       | <b>v</b> |                  |                              |        | 1,894,530                                   | 0  | 170,473  |
| (53) SEAN REYNOLDS                 | 40.0   |                                |                       |          |                  |                              |        |   |  |  |
| VP AND CHIEF INFORMATION OFFICER   |  |                                |                       | <b>✓</b> |                  |                              |        | 498,550                                     | 0  | 34,688   |
| (54) INGRID S. STAFFORD            | 40.0   |                                |                       | 1        |                  |                              |        |   | _  |  |
| VP FOR FINANCIAL OPERATIONS        |  |                                |                       | •        |                  |                              |        | 357,493                                     | 0  | 34,760   |
| (55) PATRICIA TELLES-IRVIN         | 40.0   |                                |                       | /        |                  |                              |        |   |  |  |
| VP STUDENT AFFAIRS                 |  |                                |                       | <b>✓</b> |                  |                              |        | 503,949                                     | 0  | 50,696   |
| (56) JOSEPH T. WALSH, JR.          | 40.0   |                                |                       | /        |                  |                              |        |   | _  |  |
| VP FOR RESEARCH                    |  |                                |                       | ✓        |                  |                              |        | 389,432                                     | 0  | 67,567   |
| (57) PATRICK W. FITZGERALD II      | 40.0   |                                |                       |          |                  |                              |        |   |  |  |
| HEAD COACH                         |  |                                |                       | İ        |                  | ✓                            |        | 5,086,657                                   | 0  | 58,280   |
| (58) CHRISTOPHER R. COLLINS        | 40.0   |                                |                       |          |                  | /                            |        |   |  |  |
| HEAD COACH                         |  |                                |                       |          |                  | ✓                            |        | 2,457,172                                   | 0  | 108,057  |
| (59) MACIEJ S LESNIAK              | 40.0   |                                |                       |          |                  |                              |        |   |  |  |
| PROFESSOR NEUROLOGICAL<br>SURGERY  |  |                                |                       |          |                  | ✓                            |        | 1,363,881                                   | 0  | 27,704   |
| (60) SALLY E BLOUNT                | 40.0   |                                |                       |          |                  |                              |        |   |  | -  |
| DEAN, KELLOGG                      |  |                                |                       |          |                  | ✓                            |        | 1,093,988                                   | 0  | 37,238   |
| (61) PETER A. BELYTSCHKO           | 40.0   |                                |                       |          |                  |                              |        |   |  |  |
| MANAGING DIRECTOR,<br>INVESTMENTS  | -10.0  |                                |                       |          |                  | ✓                            |        | 994,521                                     | 0  | 288,147  |
| (62) DANIEL I. LINZER              | 40.0   |                                | $\dashv$              |          |                  |                              |        |   |  | · · · · · · · · · · · · · · · · · · ·                                    |
| FORMER PROVOST                     |  |                                |                       |          |                  |                              | ✓      | 645,716                                     | 0  | 292,294  |

### **SCHEDULE A**

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

OMB No. 1545-0047 2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NORTHWESTERN UNIVERSITY

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer Identification number 36-2167817

|        | Reason for Public Charity Status (All organizations must complete this part.) See instructions.   |  |  |   |                          |   |   |  |  |
|--------|---|--|--|---|--------------------------|---|---|--|--|
| The c  | organization is not a private founda  |  |  |   |                          |   |   |  |  |
| 1      | A church, convention of church  |  |  |   |                          |   |   |  |  |
| 2      | A school described in section   |  |  |   |                          |   |   |  |  |
| 3      | <ul> <li>☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III).</li> <li>☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). Enter the</li> </ul>  |  |  |   |                          |   |   |  |  |
| 4      | hospitai's name, city, and state  | <b>)</b> :   |  |   |                          |   |   |  |  |
| 5      | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)   |  |  |   |                          |   |   |  |  |
| 6<br>7 | ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  |  |  |   |                          |   |   |  |  |
| 8      | ☐ A community trust described in  |  |  |   |                          |   |   |  |  |
| 9      | ☐ An agricultural research organi<br>or university or a non-land-grauuniversity:  | nt college of agri                                   | lculture (see instructio   | ns). Ente                               | r the nam                | ne, city, and state of                                  | the college or  |  |  |
| 10     | An organization that normally receipts from activities related support from gross investment acquired by the organization a   | to its exempt ful<br>income and uni                  | nctions—subject to co<br>related business taxat                                    | ertain exc<br>ole incom                 | eptions, :<br>e (less se | and (2) no more that<br>ection 511 tax) from            | o fees, and gross<br>n 331,8% of its<br>businesses    |  |  |
| 11     | An organization organized and   | operated exclus                                      | sively to test for public  | safety. S                               | See secti                | on 509(a)(4).   |   |  |  |
| 12     | ☐ An organization organized and   | operated exclus                                      | ively for the benefit of   | , to perfo                              | rm the fu                | inctions of, or to car                                  | ry out the purposes                                   |  |  |
|        | of one or more publicly support<br>Check the box in lines 12a thro  | orted organization                                   | ns described in secti  | on 509(a)<br>porting o                  | (1) or se<br>rganizatio  | ection 509(a)(2). See<br>on and complete line           | e section 509(a)(3).<br>s 12e. 12f. and 12a.          |  |  |
| _      | m =   |  |  |   |                          |   |   |  |  |
| а      | the supported organization supporting organization. Ye  | (s) the power to                                     | regularly appoint or e   | lect a ma                               | ority of t               | he directors or trust                                   | ees of the  |  |  |
| b      | Type II. A supporting organ   | nization supervis                                    | ed or controlled in co   | nnection                                | with its s               | upported organization                                   | on(s), by having                                      |  |  |
|        | control or management of organization(s). You must  | the supporting o<br>complete Part I                  | rganization vested in<br>V, Sections A and C.                                      | the same                                | persons                  | that control or mana                                    | age the supported                                     |  |  |
| C      | Type III functionally integ<br>its supported organization(  | r <mark>ated. A</mark> support<br>s) (see instructio | ting organization oper<br>ns). You must compl                                      | ated in co<br>ete Part                  | onnection<br>IV, Secti   | n with, and functiona<br>ons <b>A, D, and E.</b>        | ally integrated with,                                 |  |  |
| d      | Type III non-functionally integer that is not functionally integer requirement (see instructionally integer instructionally integer instructionally integer instructionally integer | grated. The orga                                     | nization generally mus   | st satisfy                              | a distribu               | ition requirement an                                    | orted organization(s)<br>d an attentiveness           |  |  |
| е      | Check this box if the organ functionally integrated, or 1   | ization received<br>Type III non-func                | a written determination tionally integrated sup                                    | on from the operating of                | ie IRS tha<br>organizati | at it is a Type I, <b>T</b> ype<br>ion.                 | II, Type III  |  |  |
| f      |   |  |  |   |                          |   |   |  |  |
| g      | Provide the following information   | about the supp                                       |  | T                                       |                          |   |   |  |  |
|        | (I) Name of supported organization  | (ii) EIN   | (iii) Type of organization<br>(described on lines 110<br>above (see instructions)) | (iv) Is the o<br>listed in you<br>docur | r governing              | (v) Amount of monetary<br>support (see<br>instructions) | (vi) Amount of<br>other support (see<br>Instructions) |  |  |
|        |   |  |  | Yes                                     | No                       |   |   |  |  |
| (A)    |   |  |  |   |                          |   |   |  |  |
| (B)    |   |  |  |   |                          |   |   |  |  |
| (C)    |   |  |  |   |                          |   |   |  |  |
| (D)    |   |  |  |   |                          |   |   |  |  |
| (E)    |   |  |  |   | _                        |   |   |  |  |
|        |   | l  |  |   |                          |   |   |  |  |

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sect  | ion A. Public Support  |                    |   |                 | *************************************** |                 | *****                      |
|-------|--|--------------------|---|-----------------|---|-----------------|----------------------------|
| Caler | ndar year (or fiscal year beginning in) 🕨                                    | (a) 2013           | (b) 2014                                | (c) 2015        | (d) 2016                                | (e) 2017        | (f) Total                  |
| 1     | Gifts, grants, contributions, and membership fees received. (Do not          |                    |   | (0, 20 :0       | (4) 2010                                | (0) 2011        | (i) Total                  |
|       | include any "unusual grants.")   | 625,656,043        | 501,895,829                             | 457,650,977     | 395,669,600                             | 373 724 245     | 2,354,596,694              |
| 2     | Tax revenues levied for the  | 520,000,010        | 001,000,020                             | 401,000,077     | 393,009,000                             | 010,124,240     | 2,334,380,084              |
| _     | organization's benefit and either paid                                       |                    |   |                 |   |                 |                            |
|       | to or expended on its behalf   |                    |   |                 |   |                 |                            |
| 3     | The value of services or facilities  |                    | *************************************** |                 |   |                 | 0                          |
| J     | furnished by a governmental unit to the                                      |                    |   |                 |   |                 |                            |
|       | organization without charge  |                    |   |                 |   |                 |                            |
| 4     | Total. Add lines 1 through 3   | 625,656,043        | 501,895,829                             | 457 650 077     | 205 660 600                             | 272 724 245     | 0                          |
|       | <del>-</del>   | 023,030,043        | 501,095,029                             | 457,650,977     | 395,669,600                             | 3/3,/24,245     | 2,354,596,694              |
| 5     | The portion of total contributions by  |                    |   |                 |   |                 |                            |
|       | each person (other than a  |                    |   |                 |   |                 |                            |
|       | governmental unit or publicly  |                    |   |                 |   |                 |                            |
|       | supported organization) included on line 1 that exceeds 2% of the amount     |                    |   |                 |   |                 |                            |
|       | shown on line 11, column (f)   |                    |   |                 |   |                 |                            |
| 6     | Public support. Subtract line 5 from line 4                                  |                    |   |                 |   |                 | 271,295,170                |
|       | on B. Total Support  |                    |   |                 |   |                 | 2,083,301,524              |
|       | idar year (or fiscal year beginning in)                                      | (a) 2013           | (b) 2014                                | (c) 2015        | (d) 2016                                | (a) 2017        | (6 Total                   |
| 7     | Amounts from line 4  | 625,656,043        | 501,895,829                             | 457,650,977     | 395,669,600                             | (e) 2017        | (f) Total<br>2,354,596,694 |
| 8     | Gross income from interest, dividends,                                       | 020,030,040        | 501,030,023                             | 116,000,101     | 393,009,000                             | 313,124,243     | 2,334,380,084              |
| •     | payments received on securities loans,                                       |                    |   |                 |   | :               |                            |
|       | rents, royalties, and income from  |                    |   |                 |   |                 |                            |
|       | similar sources  | 788,554,989        | 606 044 042                             | 504 204 200     | 404.054.405                             | 464.040.400     | 0.004.700.000              |
| 9     | Net income from unrelated business   | 700,004,909        | 686,844,013                             | 591,284,260     | 494,054,135                             | 404,049,403     | 3,024,786,800              |
| •     | activities, whether or not the business                                      |                    |   |                 |   |                 |                            |
|       | is regularly carried on  |                    | 27 007 224                              |                 |   |                 | 07.007.004                 |
| 10    | Other income. Do not include gain or   |                    | 27,897,331                              | 0               | 0                                       | 0               | 27,897,331                 |
| 10    | loss from the sale of capital assets   |                    |   |                 |   |                 |                            |
|       | (Explain in Part VI.)  | 446 400            | E40 E4E                                 | 4 970 565       | 4 200 550                               | 700 000         | 4 540 057                  |
| 11    | Total support. Add lines 7 through 10  | 416,499            | 549,545                                 | 1,370,565       | 1,386,550                               | 789,898         | 4,513,057                  |
| 12    | Gross receipts from related activities, etc.                                 | Jean instruction   | nc)                                     |                 |   | امد             | 5,411,793,882              |
| 13    | First five years. If the Form 990 is for the                                 | . (see ilistiuctio | rioj,<br>Polimit cocon                  | · · · · · · ·   | or fifth tours                          | 12              | 9,077,260,801              |
|       | organization check this how and stop her                                     | ra                 | S mst, second                           | a, ama, ioarai, | or multitax ye                          | ear as a sectio | 11 50 1(0)(3)              |
| Secti | organization, check this box and stop her on C. Computation of Public Suppor | t Doroontage       | · · · · · · · · · · · · · · · · · · ·   | • • • • •       |   |                 |                            |
| 14    | Public support percentage for 2017 (line 6                                   |                    |   | d solumen (6)   |   |                 | DO ED 0/                   |
| 15    | Public support percentage from 2016 Sch                                      |                    |   |                 | - t                                     | 14              | 38.50 %                    |
|       | 331/2% support test—2017. If the organi                                      |                    |   | on line 10 on   | [                                       | 15              | 36.94 %                    |
| 100   | box and stop here. The organization qual                                     | ifine se a public  | check the box                           | organization    | u IIIIe 14 IS 33                        | v3% or more,    | check this                 |
| b     | 33½% support test—2016. If the organization                                  | ration did not a   | ciy supported                           | organization    |   |                 | 🚩 🗹                        |
| D     | this box and stop here. The organization                                     | cualifice se s n   | ublick a box o                          | Tille 13 Of 168 | a, and line is i                        | S 3373% OF M    | _                          |
| 470   |  |                    |   | =               |   |                 |                            |
| 17a   | 10%-facts-and-circumstances test—20  | ote the "feete     | nization did no                         | ot check a box  | on line 13, 16                          | Sa, or 16b, and | line 14 is                 |
|       | 10% or more, and if the organization me                                      | ets the "facts-    | and-circumsta                           | inces" test, ch | eck this box a                          | nd stop here.   | Explain in                 |
|       | Part VI how the organization meets the "I                                    | iacts-and-circu    | mstances" tes                           | st. The organiz | ation qualities                         | as a publicly   | supported                  |
|       | organization   |                    |   |                 |   |                 |                            |
| þ     | 10%-facts-and-circumstances test—20  | 16. If the orga    | nization did no                         | ot check a box  | on line 13, 10                          | 6a, 16b, or 17a | a, and line                |
|       | 15 is 10% or more, and if the organization of                                | tion meets the     | racts-and-c                             | rcumstances"    | test, check t                           | his box and s   | top here.                  |
|       | Explain in Part VI how the organization in                                   | ieets the "facts   | s-and-circums                           | tances" test. T | ne organizatio                          | on qualifies as | a publicly                 |
| 10    | supported organization   | ب ب ب ب ب          |   | 40- 40- 4-      |   |                 | ▶ 🗆                        |
| 18    | Private foundation. If the organization did                                  |                    |   |                 |   |                 |                            |
|       | instructions   | · · · · ·          | · · · ·                                 |                 |   |                 | ., <b>&gt;</b> []          |

Part III Support Schedule for Organizations Described in Section 509(a)(2)

| Support Confeduto for Organizations December in Security 1-1/1-1   |         |
|--|---------|
| (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Pa | art II. |
| If the organization fails to qualify under the tests listed below, please complete Part II.)                 |         |

| Section | on A. Public Support   |                 |                   |                   |                  |                       |              |
|---------|--|-----------------|-------------------|-------------------|------------------|-----------------------|--------------|
|         | dar year (or fiscal year beginning in) 🕨   | (a) 2013        | (b) 2014          | (c) 2015          | (d) 2016         | (e) 2017              | (f) Total    |
| 1       | Gitts, grants, contributions, and membership fees  |                 |                   |                   |                  |                       |              |
|         | received. (Do not include any "unusual grants.")   |                 |                   |                   |                  |                       |              |
| 2       | Gross receipts from admissions, merchandise  |                 |                   |                   |                  |                       |              |
|         | sold or services performed, or facilities furnished in any activity that is related to the |                 |                   |                   |                  |                       |              |
|         | organization's tax-exempt purpose  |                 |                   |                   |                  |                       |              |
| 3       | Gross receipts from activities that are not an   |                 |                   |                   |                  |                       |              |
|         | unrelated trade or business under section 513  |                 |                   |                   |                  |                       |              |
| 4       | Tax revenues levied for the  |                 |                   |                   |                  |                       |              |
|         | organization's benefit and either paid to  |                 |                   |                   |                  |                       |              |
|         | or expended on its behalf  |                 |                   | :                 | 1                |                       |              |
| 5       | The value of services or facilities  |                 |                   |                   |                  |                       |              |
|         | furnished by a governmental unit to the  |                 |                   |                   |                  |                       |              |
|         | organization without charge .  |                 |                   |                   |                  |                       |              |
| 6       | Total. Add lines 1 through 5   |                 |                   |                   |                  |                       |              |
| 7a      | Amounts included on lines 1, 2, and 3  |                 |                   |                   |                  |                       |              |
|         | received from disqualified persons .   |                 |                   |                   |                  |                       |              |
| ь       | Amounts included on lines 2 and 3  |                 |                   |                   |                  |                       |              |
| _       | received from other than disqualified  |                 |                   |                   |                  |                       |              |
|         | persons that exceed the greater of \$5,000   |                 |                   |                   |                  |                       |              |
|         | or 1% of the amount on line 13 for the year  |                 |                   |                   |                  |                       |              |
| C       | Add lines 7a and 7b  |                 |                   |                   |                  |                       |              |
| 8       | Public support. (Subtract line 7c from   |                 |                   |                   |                  |                       |              |
|         | line 6.)   |                 |                   |                   |                  |                       |              |
|         | on B. Total Support  |                 |                   |                   |                  | 1                     |              |
| Calen   | dar year (or fiscal year beginning in)   | (a) 2013        | (b) 2014          | (c) 2015          | (d) 2016         | (e) 2017              | (f) Total    |
| 9       | Amounts from line 6  |                 |                   |                   |                  |                       |              |
| 10a     | Gross income from interest, dividends,   |                 |                   |                   | 1                |                       |              |
|         | payments received on securities loans, rents,  |                 |                   |                   |                  |                       |              |
|         | royalties, and income from similar sources .   |                 |                   |                   |                  |                       |              |
| b       | Unrelated business taxable income (less  |                 |                   |                   |                  |                       |              |
|         | section 511 taxes) from businesses   |                 |                   |                   |                  |                       |              |
|         | acquired after June 30, 1975   |                 |                   |                   |                  |                       |              |
| C       | Add lines 10a and 10b  |                 |                   |                   |                  |                       |              |
| 11      | Net income from unrelated business   |                 |                   |                   |                  |                       |              |
|         | activities not included in line 10b, whether   |                 |                   |                   |                  |                       |              |
|         | or not the business is regularly carried on  |                 |                   |                   | <del> </del>     |                       |              |
| 12      | Other income. Do not include gain or   |                 |                   |                   |                  |                       | 1            |
|         | loss from the sale of capital assets   |                 |                   |                   |                  |                       |              |
|         | (Explain in Part VI.)  |                 |                   | 1                 |                  |                       |              |
| 13      | Total support. (Add lines 9, 10c, 11, and 12.)   | 1               |                   |                   |                  |                       |              |
| 4.4     | First five years. If the Form 990 is for t   | ho organizatio  | n'e firet eacor   | d third fourt     | h or fifth tax v | l<br>lear as a sectio | on 501(c)(3) |
| 14      | organization, check this box and stop he   |                 | 11 3 11131, 36001 | ia, ama, ious     |                  |                       | ▶ □          |
| Saat    | ion C. Computation of Public Suppo   |                 |                   |                   |                  |                       |              |
| 15      | Public support percentage for 2017 (line   | 8 column (f) o  | livided by line   | (1) column        |                  | 15                    | %            |
| 16      | Public support percentage from 2016 Sc   | hedule A. Parl  | III. line 15 .    |                   |                  | . 16                  | %            |
| Sect    | ion D. Computation of Investment In  | come Perce      | entage            |                   |                  |                       |              |
| 17      | Investment income percentage for 2017  | (line 10c. colu | mn (f) divided t  | ov line 13, colu  | ımn (f))         | . 17                  | %            |
| 18      | Investment income percentage from 201  | 6 Schedule A.   | Part III, line 17 | '                 |                  | . 18                  | %            |
| 19a     | 331/3% support tests-2017, if the organ  | nization did no | t check the bo    | x on line 14,     | and line 15 is r | nore than 331/3       | %, and line  |
| 190     | 17 is not more than 331/3%, check this box   | and stop here   | e. The organizat  | ion qualifies as  | a publicly supp  | orted organizat       | tìon . 🟲 📙   |
| ь       | 331/3% support tests-2016, if the organi   | zation did not  | check a box on    | line 14 or line   | 19a, and line 1  | 6 is more than        | 331/3%, and  |
|         | line 18 is not more than 331/3%, check this  | box and stop    | here. The orgar   | nization qualifie | es as a publicly | supported organ       | nization 🟲 📋 |
| 20      | Private foundation. If the organization of   | lid not check a | box on line 14    | i, 19a, or 19b,   | check this box   | k and see instru      | uctions 🕨 🗌  |

#### Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

## <u>S</u>

| Sect | tion A. All Supporting Organizations  | art      | •) |             |
|------|---|----------|----|-------------|
|      |   |          | Va | s No        |
| 1    | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.   | 1        |    |             |
| 2    | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).   | 2        |    |             |
| За   | (b) and (c) below.  | 3a       |    |             |
| b    | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.  | 3b       |    |             |
| C    | purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.  | 3c       |    |             |
| 4a   | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.  | 4a       |    |             |
| b    | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.   | 4b       |    |             |
| c    | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.  | 4c       |    |             |
| 5a   | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a       |    |             |
| b    | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   | 5a       |    |             |
| C    | Substitutions only. Was the substitution the result of an event beyond the organization's control?  | 5c       |    | <del></del> |
| 6    | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.   | 6        |    |             |
| 7    | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).  | 7        |    |             |
| 8    | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).   | 8        |    |             |
| 9a   | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.  | 9a       |    |             |
| b    | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.   | 9a<br>9b |    |             |
| С    | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.  | 9c       |    |             |
| 10a  | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.  | 10a      |    |             |

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10a

10b

| OCI IOCIUR | 5 A (1 OIII 650 01 600 EE) 2011   |              |  |
|------------|---|--------------|--|
| Part l     | V Supporting Organizations (continued)  |              | NI-  |
|            | 10 10 10 10 10 10 10 10 10 10 10 10 10 1  | Yes          | No   |
| 11         | Has the organization accepted a gift or contribution from any of the following persons?   |              |  |
| а          | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?   | 11a          |  |
| L          | A family member of a person described in (a) above?   | 11b          | <del>                                     </del> |
| D          | A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.   | 11c          | <u> </u>   |
| Section 1  | on B. Type I Supporting Organizations   | ·            |  |
|            |   | Yes          | No   |
| 1          | Did the directors, trustees, or membership of one or more supported organizations have the power to   |              |  |
|            | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the  |              |  |
|            | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,                   |              |  |
|            | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported   |              |  |
|            | organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  | 1            |  |
| 9          | Did the organization operate for the benefit of any supported organization other than the supported   |              |  |
| 2          | organization/s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part   |              |  |
|            | VI how providing such benefit carried out the purposes of the supported organization(s) that operated,  |              |  |
|            | supervised, or controlled the supporting organization.  | 2            | <u> </u>   |
| Secti      | on C. Type II Supporting Organizations  |              | 1 41 -   |
|            |   | Yes          | No   |
| 1          | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors  |              |  |
|            | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed                    |              |  |
|            | the supported organization(s).  | 1            |  |
| Secti      | on D. All Type III Supporting Organizations   |              |  |
|            |   | Yes          | No   |
| 1          | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the  |              |  |
|            | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax   |              |  |
|            | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1            |  |
|            |   |              |  |
| 2          | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how     |              |  |
|            | the organization maintained a close and continuous working relationship with the supported organization(s).   | 2            |  |
| 3          | By reason of the relationship described in (2), did the organization's supported organizations have a   |              |  |
| •          | significant voice in the organization's investment policies and in directing the use of the organization's  |              |  |
|            | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's  |              |  |
|            | supported organizations played in this regard.  | 3            | <u> </u>   |
| Secti      | on E. Type III Functionally Integrated Supporting Organizations   |              |  |
| 1          | Check the box next to the method that the organization used to satisfy the integral Part Test during the year (see  | instruction  | 7S).   |
| а          | The organization satisfied the Activities Test. Complete line 2 below.  |              |  |
| b          | The organization is the parent of each of its supported organizations. Complete line 3 below.   |              |  |
| C          | ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity   | (see instruc | uons).   |
| 2          | Activities Test. Answer (a) and (b) below.  | Yes          | No.  |
| -<br>а     | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of  |              |  |
|            | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identity  |              |  |
|            | those supported organizations and explain how these activities directly furthered their exempt purposes,  |              |  |
|            | how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  | 2a           |  |
| -          |   | Za           |  |
| b          | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the        |              |  |
|            | reasons for the organization's position that its supported organization(s) would have engaged in these  |              |  |
|            | activities but for the organization's involvement.  | 2b           |  |
| 3          | Parent of Supported Organizations. Answer (a) and (b) below.  |              |  |
| о<br>a     | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or   |              |  |
| _          | trustees of each of the supported organizations? Provide details in Part VI.  | 3a           |  |
| b          | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each   |              |  |
| _          | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.   | 3b           | Щ  |

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or  | gar   | nizations  | ·· · · · · · · · · · · · · · · · · · ·   |
|--|-------|--|--|
| Check here if the organization satisfied the integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated supporting organization.                                       | a tri | ust on Nov. 20, 1970 (expla  | ain in Part VI). See<br>ons A through E. |
| Section A - Adjusted Net Income  |       | (A) Prior Year   | (B) Current Year<br>(optional)           |
| 1 Net short-term capital gain  | 1     |  |  |
| 2 Recoveries of prior-year distributions   | 2     |  |  |
| 3 Other gross income (see instructions)  | 3     |  |  |
| 4 Add lines 1 through 3.   | 4     |  |  |
| 5 Depreciation and depletion   | 5     |  |  |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6     | E  |  |
| 7 Other expenses (see instructions)  | 7     |  |  |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).  | 8     |  |  |
| Section B - Minimum Asset Amount   |       | (A) Prior Year   | (B) Current Year<br>(optional)           |
| Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  |       |  |  |
| a Average monthly value of securities  | 1a    |  |  |
| b Average monthly cash balances  | 1b    |  |  |
| c Fair market value of other non-exempt-use assets   | 1c    |  |  |
| d Total (add lines 1a, 1b, and 1c)   | 1d    |  |  |
| e Discount claimed for blockage or other   |       | I  |  |
| factors (explain in detail in Part VI):  |       |  |  |
| 2 Acquisition indebtedness applicable to non-exempt-use assets   | 2     |  |  |
| 3 Subtract line 2 from line 1d.  | 3     |  |  |
| 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,   |       |  |  |
| see instructions).   | 4     |  |  |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5     |  |  |
| 6 Multiply line 5 by .035.   | 6     |  |  |
| 7 Recoveries of prior-year distributions   | 7     |  |  |
| 8 Minimum Asset Amount (add line 7 to line 6)  | 8     | ***************************************  |  |
| Section C - Distributable Amount   |       |  | Current Year                             |
| 1 Adjusted net income for prior year (from Section A, line 8, Column A)  | 1     |  |  |
| 2 Enter 85% of line 1.   | 2     | Paralle San Control of the Control o |  |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A)   | 3     |  |  |
| 4 Enter greater of line 2 or line 3.   | 4     |  |  |
| 5 Income tax imposed in prior year   | 5     |  |  |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to   |       |  |  |
| emergency temporary reduction (see instructions).  | 6     |  |  |
| 7 Check here if the current year is the organization's first as a non-functionally instructions).  | / int | egrated Type III supporting  | organization (see                        |

| Part  | Type III Non-Functionally Integrated 509(a)(3                | ) Supporting Organi  | zations (continued) |                 |
|-------|--|--|---------------------|-----------------|
| Secti | on D - Distributions   |  |                     | Current Year    |
| 1     | Amounts paid to supported organizations to accomplish e      | exempt purposes  |                     |                 |
| 2     | Amounts paid to perform activity that directly furthers exe  | mpt purposes of suppo  | rted                |                 |
|       | organizations, in excess of income from activity             |  |                     |                 |
| 3     | Administrative expenses paid to accomplish exempt purp       | oses of supported orga   | nizations           |                 |
| 4     | Amounts paid to acquire exempt-use assets                    |  |                     |                 |
| 5     | Qualified set-aside amounts (prior IRS approval required)    |  |                     |                 |
| 6     | Other distributions (describe in Part VI). See instructions. |  |                     |                 |
| 7     | Total annual distributions. Add lines 1 through 6.           |  |                     |                 |
| 8     | Distributions to attentive supported organizations to which  | h the organization is res  | ponsive             |                 |
| _     | (provide details in Part Vi). See instructions.              |  |                     |                 |
| 9     | Distributable amount for 2017 from Section C, line 6         |  |                     |                 |
| 10    | Line 8 amount divided by line 9 amount                       |  |                     |                 |
|       |  | a)   | (ii)                | (iii)           |
| Se    | ection E - Distribution Allocations (see instructions)       | (I)<br>Excess Distributions  | Underdistributions  | Distributable   |
|       |  | EXCess Distributions   | Pre-2017            | Amount for 2017 |
| 1     | Distributable amount for 2017 from Section C, line 6         |  |                     |                 |
| 2     | Underdistributions, if any, for years prior to 2017          |  |                     |                 |
|       | (reasonable cause required—explain in Part VI). See          |  |                     |                 |
|       | Instructions.  |  |                     |                 |
| 3     | Excess distributions carryover, if any, to 2017              |  |                     |                 |
| a     |  |  |                     |                 |
| b     | From 2013  |  |                     |                 |
|       | From 2014  |  |                     | 200             |
| d     | From 2015  |  |                     |                 |
|       | From 2016  |  |                     |                 |
| f     | Total of lines 3a through e                                  |  |                     |                 |
| g     | Applied to underdistributions of prior years                 |  |                     |                 |
| h     | Applied to 2017 distributable amount                         |  |                     |                 |
| ı     | Carryover from 2012 not applied (see instructions)           |  |                     |                 |
| i     | Remainder, Subtract lines 3g, 3h, and 3l from 3f.            |  |                     |                 |
| 4     | Distributions for 2017 from                                  |  |                     |                 |
|       | Section D, line 7: \$  |  |                     |                 |
| a     | Applied to underdistributions of prior years                 |  |                     |                 |
| b     | Applied to 2017 distributable amount                         |  |                     |                 |
| С     | Remainder. Subtract lines 4a and 4b from 4.                  |  |                     |                 |
| 5     | Remaining underdistributions for years prior to 2017, if     |  |                     |                 |
| -     | any. Subtract lines 3g and 4a from line 2. For result        |  |                     |                 |
|       | greater than zero, explain in Part VI. See instructions.     |  |                     |                 |
| 6     | Remaining underdistributions for 2017. Subtract lines 3h     |  |                     |                 |
| _     | and 4b from line 1. For result greater than zero, explain in | l Control of the Cont |                     |                 |
|       | Part VI. See instructions.                                   |  |                     | 113 Aug         |
| 7     | Excess distributions carryover to 2018. Add lines 3j         |  |                     |                 |
|       | and 4c.  |  |                     |                 |
| 8     | Breakdown of line 7:   |  |                     |                 |
| a     | Excess from 2013   |  |                     |                 |
| b     | Excess from 2014   |  |                     |                 |
| C     | Excess from 2015   |  |                     |                 |
| d     | Excess from 2016   |  |                     |                 |
| е     | Excess from 2017   |  |                     |                 |

### Part VI

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6.Also complete this part for any additional information. (See instructions.)

| Return Reference - Identifier           |             |          |          | Explanation |           |          |           |
|---|-------------|----------|----------|-------------|-----------|----------|-----------|
| SCHEDULE A, PART II,<br>LINE 10 - OTHER | Description | (a) 2013 | (b) 2014 | (c) 2015    | (d) 2016  | (e) 2017 | (f) Total |
| INCOME                                  | FUNDRAISING | 416,499  | 549,545  | 1,370,565   | 1,386,550 | 789,898  | 4,513,057 |
|   | Total       | 416,499  | 549,545  | 1,370,565   | 1,386,550 | 789,898  | 4,513,057 |

### Schedule B

(Form 990, 990-EZ, or 990-PF

Department of the Treasury Internal Revenue Service Name of the organization

NORTHWESTERN UNIVERSITY

### Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2017

Employer identification number

36-2167817

Organization type (check one): Filers of: Section: ) (enter number) organization Form 990 or 990-EZ ✓ 501(c)( 3 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☐ 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of crueity to children or animals. Complete Parts I, II, and III. For an organization described in section 601(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . . . . . . . . . . . . . ▶ \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

| Part I     | Contributors (see instructions). Use duplicate co | ppies of Part I if additional space is | needed.  |
|------------|---|--|--|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 1          |   | \$ 88,581,873                          | Person  Payroli  Noncash  (Complete Part II for noncash contributions.)    |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 2          |   | \$\$<br>\$                             | Person  Payroll  Noncash  (Complete Part II for noncash contributions.)    |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Total contributions             | (d)<br>Type of contribution  |
|            |   | \$\$                                   | Person  Payroll  Noncash  (Complete Part II for noncash contributions.)    |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 4 -        |   | \$ 12,246,804                          | Person   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 5          |   | \$ 8,178,000<br>                       | Person  Payroll  Noncash  (Complete Part II for noncash contributions.)    |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 6          |   | \$ 8,070,715                           | Person   Payroll   Noncash   (Complete Part II for noncash contributions.) |

Name of organization NORTHWESTERN UNIVERSITY Employer identification number 36-2167817

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (c) FMV (or estimate) (See instructions.) (a) No. (d) Date received (b)
Description of noncash property given from Part I RESTRICTED INVESTMENT 2 10/31/2017 16,190,270 (c) FMV (or estimate) (See instructions.) (a) No. (d) Date received (b) from Description of noncash property given Part I ONLINE SUBSCRIPTIONS 06/15/2018 12,246,804 (c) FMV (or estimate) (See instructions.) (a) No. (d) from **Date received** Description of noncash property given Part I **SECURITIES** 5 12/05/2017 1,456,114 (c) FMV (or estimate) (See instructions.) (a) No. (d) from Date received Description of noncash property given Part I (c) FMV (or estimate) (a) No. (d) from Date received Description of noncash property given (See instructions.) Part I (c) FMV (or estimate) (a) No. from (d) Date received Description of noncash property given (See instructions.) Part I

Name of organization Employer identification number NORTHWESTERN UNIVERSITY 36-2167817 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2017

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

|               | see separate instructions), tr     |   |                         |  |  |
|---------------|------------------------------------|---|-------------------------|--|--|
|               | ection 501(c)(4), (5), or (6) orga | nizations: Complete Part III.   |                         |  | NE - N   |
|               | of organization                    |   |                         | 1 ' -  | tification number                                  |
|               | HWESTERN UNIVERSITY                |   |                         | 1  | 36-2167817   |
| Part          | I-A Complete if the                | e organization is exempt ur   | ider section 501(       | c) or is a section 527 c                       | organization.                                      |
| 1             | Provide a description of           | the organization's direct and   | indirect political ca   | impaign activities in Part                     | IV. (see instructions for                          |
|               | definition of "political can       |   |                         |  |  |
| 2             | Political campaign activit         | y expenditures (see instructions                                      | )                       | <b> ▶</b> \$                                   |  |
| 3             | Volunteer hours for politic        | cal campaign activities (see inst                                     | ructions)               |  |  |
| Part          | I-B Complete if the                | e organization is exempt ur   | ider section 501(       | c)(3).   |  |
| 1             | Enter the amount of any            | excise tax incurred by the organ                                      | ization under sectio    | n 4955 ▶ 🔻                                     | ,  |
| 2             | Enter the amount of any            | excise tax incurred by organizat                                      | ion managers under      | section 4955 🕨 🦠                               | <del></del>  |
| 3             |                                    | ed a section 4955 tax, did it file I                                  |                         |  | Yes No   |
| 4a            | Was a correction made?             |   |                         |  | Yes No   |
| b             | if "Yes," describe in Part         | IV.   |                         |  | 1-161  |
| Part          |                                    | e organization is exempt ur   |                         |  | (C)(3).  |
| 1             |                                    | ly expended by the filing orga  |                         |  |  |
|               |                                    |   |                         |  |  |
| 2             | Enter the amount of the            | filing organization's funds conf                                      | tributed to other org   | ganizations for section                        |  |
|               | 527 exempt function acti           | vities  |                         |  |  |
| 3             | Total exempt function e            | expenditures. Add lines 1 and   | 2. Enter here and       | on Form 1120-POL,                              |  |
|               | line 17b                           |   |                         |  |  |
| 4             | Did the filing organization        | n file Form 1120-POL for this ye                                      | ar?                     |  | Yes No   |
| 5             | Enter the names, address           | ses and employer identification (                                     | number (EIN) of all s   | ection 527 political organi                    | zations to which the filing                        |
|               | organization made paymo            | ents. For each organization liste                                     | d, enter the amount     | paid from the filling organi                   | ization's funds. Also enter                        |
|               | the amount of political co         | ontributions received that were p<br>fund or a political action commi | promptly and directly   | r delivered to a separate p                    | de information in Part IV                          |
|               | as a separate segregated           | Tund of a political action commi                                      | Tiee (FAC). II addition | ilai space is fleeded, provi                   |  |
|               | (a) Name                           | (b) Address   | (c) EIN                 | (d) Amount paid from                           | (e) Amount of political contributions received and |
|               |                                    |   |                         | filing organization's funds. If none, enter -0 | promptly and directly                              |
|               |                                    |   |                         | ,  | delivered to a separate                            |
|               |                                    |   |                         |  | political organization.  If none, enter -0         |
|               | ···                                |   |                         |  |  |
| (1)           |                                    |   |                         |  |  |
| <del></del> - |                                    |   |                         |  |  |
| (2)           |                                    |   |                         |  |  |
|               |                                    |   |                         |  |  |
| (3)           |                                    |   |                         |  |  |
|               |                                    |   |                         |  |  |
| (4)           |                                    |   |                         |  |  |
|               |                                    |   |                         |  |  |
| (5)           |                                    |   |                         |  |  |
|               |                                    |   |                         |  |  |
| (6)           |                                    |   |                         |  |  |

Cat. No. 50084S

| Sche       | lule C (Form 990 or 990-EZ) 2017  |                    |   |                   |                       | Page 2                                  |
|------------|---|--------------------|---|-------------------|-----------------------|---|
|            | t II-A Complete if the organization section 501(h)).                            |                    |   |                   | -                     | ction under                             |
|            | Check ► ☐ if the filing organization below<br>address, EIN, expenses, and       | share of excess    | s lobbying expend                       | litures).         | lliated group memb    | er's name,                              |
| ВС         | check 🕨 🗌 if the filing organization chec                                       |                    |   | rovisions apply.  |                       |   |
|            |   | bying Expendit     |   |                   | (a) Filing            | (b) Affiliated                          |
|            | (The term "expenditures" m  |                    |   |                   | organization's totals | group totals                            |
| <b>1</b> a |   | public opinion     | (grass roots lobby                      | /ing)             | 0                     |   |
| þ          | , , , , , , , , , , , , , , , , , , ,   | e a legisiative bo | ody (direct lobbyin                     | g)                | 672,552               |   |
| C          |   | la and 1b) .       |   |                   | 672,552               |   |
| d          |   |                    |   |                   | 2,957,470,679         | *******                                 |
| ę          | y are a series bulbook expenditures (ad   | d lines 1c and 1   | d)                                      |                   | 2,958,143,231         |   |
| f          | Lobbying nontaxable amount. Enter   | the amount fr      | om the following                        | g table in both   |                       | *************************************** |
|            | columns.  |                    |   |                   | 1,000,000             |   |
|            | If the amount on line 1e, column (a) or (b) is                                  | : The lobbying     | nontaxable amoun                        | t is:             |                       |   |
|            | Not over \$500,000  | 20% of the an      | ount on line 1e.                        |                   |                       |   |
|            | Over \$500,000 but not over \$1,000,000   | \$100,000 plus     | 15% of the excess                       | over \$500,000.   |                       |   |
|            | Over \$1,000,000 but not over \$1,500,000                                       | \$175,000 plus     | 10% of the excess                       | over \$1,000,000. |                       |   |
|            | Over \$1,500,000 but not over \$17,000,000                                      | \$225,000 plus     | 5% of the excess o                      | ver \$1,500,000.  |                       |   |
|            | Over \$17,000,000   | \$1,000,000.       |   |                   |                       |   |
| g          | Grassroots nontaxable amount (enter 25  | 5% of line 1f)     |   |                   | 250,000               |   |
| h          |   |                    |   |                   | 0                     | *************************************** |
| 1          | Subtract line 1f from line 1c. If zero or le                                    | ss, enter -0-      |   |                   | 0                     |   |
| J          | If there is an amount other than zero reporting section 4911 tax for this year' |                    |   | _                 |                       | Yes No                                  |
|            |   |                    | erlod Under sec                         |                   | • • • • • •           | ] 169   MO                              |
|            | (Some organizations that made a se  | ction 501(h) ele   | ection do not have<br>uctions for lines | e to compiete all | of the five column    | s below.                                |
|            | Lobbying  | j Expenditures     | During 4-Year Av                        | eraging Period    |                       |   |
|            | Calendar year (or fiscal year<br>beginning in)                                  | (a) 2014           | <b>(b)</b> 2015                         | (c) 2016          | (d) 2017              | (e) Total                               |
| 2a         |   | 1,000,000          | 1,000,000                               | 1,000,000         | 1,000,000             | 4,000,000                               |
| b          | Lobbying ceiling amount<br>(150% of line 2a, column (e))                        |                    |   |                   |                       | 6,000,000                               |
| C          | Total lobbying expenditures   | 778,346            | 693,210                                 | 545,895           | 672,552               | 2,690,003                               |

250,000

0

d Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2017

2,690,003

1,000,000

1,500,000

672,552

250,000

545,895

250,000

0

250,000

|           | (election under section 501(h)).  | (4              | a)       |          | (b)    |          |
|-----------|---|-----------------|----------|----------|--------|----------|
|           | ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ption of the lobbying activity.   | Yes             | No       | Aı       | nouni  | t        |
| 1         | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: |                 |          |          |        |          |
| а         | Volunteers?   |                 |          |          |        |          |
| b         | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  |                 |          |          |        |          |
| C         | Media advertisements?   |                 |          |          |        |          |
| d         | Mailings to members, legislators, or the public?  |                 |          |          |        |          |
| e         | Publications, or published or broadcast statements?   |                 |          |          |        |          |
| f         | Grants to other organizations for lobbying purposes?  | <u> </u>        |          |          |        |          |
| g         | Direct contact with legislators, their staffs, government officials, or a legislative body?   | <u> </u>        |          |          |        |          |
| h         | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?   | <u> </u>        |          |          |        |          |
| i         | Other activities?   |                 |          |          |        |          |
| j         | Total. Add lines 1c through 1i  |                 |          |          |        |          |
| 2a        | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?   |                 |          |          |        |          |
|           | If "Yes," enter the amount of any tax incurred under section 4912   |                 |          |          |        |          |
| C         | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?                                    |                 |          |          |        |          |
| d<br>Part |   | :)(5).          | or se    | ction    |        |          |
| ган       | 501(c)(6).  | -/(-/)          |          |          |        |          |
| ····      |   | ··········      |          |          | Yes    | No       |
| 1         | Were substantially all (90% or more) dues received nondeductible by members?  |                 |          | 1_       |        |          |
| 2         | Did the organization make only in-house lobbying expenditures of \$2,000 or less?   |                 |          | 2        |        | L        |
| 3         | Did the organization agree to carry over lobbying and political campaign activity expenditures from the   | e prior         | year?    | 3        |        | <u> </u> |
| Part      | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."   | )(5),<br>)R (b) | Pari     | ill-A,   | line   | 3, is    |
| 1         | Dues, assessments and similar amounts from members  |                 | 1        |          |        |          |
| 2         | Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  | S OI            | 00       |          |        |          |
| а         | Current year  | • •             | 2a       |          | ·····  |          |
| b         | Carryover from last year  | • •             | 2b<br>2c |          |        |          |
| C         | Total   | • •             | 3        |          |        |          |
| 3         | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | <br>f the       | 3        |          |        |          |
| 4         | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb                                 |                 |          |          |        |          |
|           | and political expenditure next year?  |                 | 4        |          |        |          |
| 5         | Taxable amount of lobbying and political expenditures (see instructions)  |                 | 5        |          |        |          |
| Part      | V Supplemental Information  |                 |          |          |        |          |
| Provid    | e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gr  | oup lis         | t); Pa   | rt II-A, | ines ' | 1 and    |
| 2 (see    | instructions); and Part II-B, line 1. Also, complete this part for any additional information.  |                 |          |          |        |          |
|           |   |                 |          |          |        |          |
|           |   |                 |          |          |        |          |
|           |   |                 |          |          |        | _~~~     |
|           |   |                 |          |          |        |          |
|           |   |                 |          |          |        |          |
| <b></b>   |   |                 |          |          |        |          |
|           |   |                 |          |          |        |          |
|           |   |                 |          |          |        |          |

#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number NORTHWESTERN UNIVERSITY 36-2167817 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . 1 1 Aggregate value of contributions to (during year) 2 372,127 0 3 Aggregate value of grants from (during year) . 20,186,550 Ð Aggregate value at end of year . . . . . 7,048,208 2,711,967 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . ✓ Yes 
☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat ☐ Preservation of a certifled historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certifled historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l) Я In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheat works of art, historical treasures, or other similar assets heid for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 . . . . . . . . . \$ b Assets included in Form 990, Part X

| Part   | Organizations Maintaining  | Collections of A                           | \rt, Historical `           | reasures,                  | or Oth    | er Similar Ass       | sets (continued)     |
|--------|--|--|-----------------------------|----------------------------|-----------|----------------------|----------------------|
| 3      | Using the organization's acquisition, a  | ccession, and oth                          | er records, ched            | k any of the               | e followi | ing that are a sig   | gnificant use of its |
|        | collection items (check all that apply):   |  | <b>—</b> .                  | _                          |           |                      |                      |
| а      | ☐ Public exhibition  |  | d 🗌 Loan                    | _                          | -         |                      |                      |
| b      | Scholarly research   |  | e 🗌 Othe                    |                            |           |                      |                      |
| C      | ☐ Preservation for future generations  |  |                             | la a conferencia           | the erge  | mizationia avam      | nt numoso in Dart    |
| 4      |  |  |                             |                            |           |                      |                      |
| _      | XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar |  |                             |                            |           |                      |                      |
| 5      | assets to be sold to raise funds rather  | solicit of receive t<br>than to be mai⊓tal | ined as part of th          | e organizati               | on's coi  | lection?             | □ Yes □ No           |
| Part   |  |  |                             |                            |           |                      |                      |
| rant   | Complete if the organization   | answered "Yes"                             | on Form 990.                | Part IV. line              | 9. or r   | eported an am        | ount on Form         |
|        | 990 Part X line 21   |  |                             |                            |           |                      |                      |
| 1a     | Is the organization an agent, trustee,   | custodian or othe                          | er intermediary f           | or contribut               | ions or   | other assets no      | t                    |
| _      | included on Form 990, Part X?  |  |                             |                            |           |                      | ☐ Yes ☐ No           |
| b      | If "Yes," explain the arrangement in Pa  | rt XIII and comple                         | te the following t          | able:                      |           |                      |                      |
|        |  | ŕ  |                             |                            |           | An                   | nount                |
| C      | Beginning balance  |  |                             |                            | 1c        |                      |                      |
| d      | Additions during the year  |  |                             |                            | 1d        |                      |                      |
| е      | Distributions during the year  |  |                             |                            | 1e        |                      |                      |
| f      | Ending balance   |  |                             |                            | 1f        |                      | N D Van D Na         |
| 2a     | Did the organization include an amoun  | it on Form 990, Pa                         | rt X, line 21, for          | escrow or cu               | ISTOCIAL  | account (Iadility)   | / [] Yes [] No       |
|        | If "Yes," explain the arrangement in Pa  | art XIII. Check here                       | if the explanation          | n nas been                 | provide   | d on Part XIII .     | <u> L.</u>           |
| Par    | Endowment Funds. Complete if the organization  | anawarad "Vas"                             | on Form 990                 | Dart IV line               | 10        |                      |                      |
|        | Complete if the organization   | (a) Current year                           | (b) Prior year              | (c) Two year               | s back    | (d) Three years back | (e) Four years back  |
| 4.     | Regioning of year balance  | 7,947,574,000                              | 7,478,167,000               |                            |           | 7,501,116,000        |                      |
| 1a     | Beginning of year balance Contributions  | 142,330,000                                | 137,388,000                 |                            | 32,000    | 269,199,000          | ~ <del> </del>       |
| b      | Net investment earnings, gains, and  | 142,000,000                                | 101,000,000                 |                            |           |                      |                      |
| Ū      | losses   | 666,151,000                                | 699,060,000                 | 75,3                       | 43,000    | 157,310,000          | 1,075,117,000        |
| d      | Grants or scholarships   | 59,278,629                                 | 57,423,395                  | <del></del>                | 69,108    | 53,907,452           | 48,218,677           |
| e      | Other expenditures for facilities and  |  |                             |                            |           |                      |                      |
|        | programs   | 309,858,371                                | 309,617,605                 | 341,1                      | 67,892    | 285,688,548          | 325,748,323          |
| f      | Administrative expenses  |  |                             |                            |           | 0                    |                      |
| g      | End of year balance  | 8,386,918,000                              |                             |                            |           | 7,588,029,000        | 7,501,116,000        |
| 2      | Provide the estimated percentage of t  |  |                             | g, column (a               | )) held a | ıs:                  |                      |
| а      | Board designated or quasi-endowmer   |  | 2%                          |                            |           |                      |                      |
| b      |  | <u>80</u> %                                |                             |                            |           |                      |                      |
| С      | Temporarily restricted endowment   | 30.80 %                                    | 2001                        |                            |           |                      |                      |
| •      | The percentages on lines 2a, 2b, and 3 Are there endowment funds not in the  | 2c should equal 10                         | JU%.<br>.c. organization th | at are held                | and adr   | ministered for th    | Δ.                   |
| за     | organization by:   | e possession or in                         | e organization ti           | at ale lietu               | and adi   | IIIIIISTOICE TOT TIT | Yes No               |
|        | •  |  |                             |                            |           |                      | 3a(i) ✓              |
|        | (i) unrelated organizations (ii) related organizations   |  |                             |                            |           |                      | 3a(ii) ✓             |
| b      | If "Yes" on line 3a(ii), are the related of  | rganizations listed                        | as required on S            | chedule R?                 |           |                      | 3b                   |
| 4      | Describe in Part XIII the intended uses  | of the organization                        | n's endowment               | funds.                     |           |                      |                      |
|        | VI Land, Buildings, and Equip  | ment.                                      |                             |                            |           |                      |                      |
|        | Complete if the organization   | answered "Yes"                             | " on Form 990,              | Part IV, line              | e 11a. S  | See Form 990,        | Part X, line 10.     |
|        | Description of property  | (a) Cost or ot                             | her basis (b) Cost          | or other basis             | (c) A     | Accumulated          | (d) Book value       |
|        |  | (Investm                                   | ent)                        | other)                     | de        | preciation           |                      |
| 1a     | Land   |  |                             | 31,036,168                 |           |                      | 31,036,168           |
| Ь      | Buildings  |  | 4,                          | 351,713,264                |           | 1,329,284,430        | 3,022,428,834        |
| C      | Leasehold improvements   | •  |                             | 39,829,487                 |           | 17,866,525           | 21,962,962           |
| d      | Equipment  | -  |                             | 651,032,995                |           | 468,426,334          | 182,606,661          |
| е      | Other  | ·  | 20. 0                       | - (D) <i>II</i> - 44       |           |                      | 3,258,034,625        |
| Total. | Add lines 1a through 1e. (Column (d) n   | nust equal Form 9:                         | 9υ, Paπ X, COIUÑ            | וו פון, ווחפ זינ, ווחפ זינ | <i></i>   |                      | J,ZJU,UJ4,UZJ        |

| Part VII       | Investments—Other Securities   |   | 000 D IV C                            |  | Page   |
|----------------|--|---|---------------------------------------|--|--|
|                | Complete if the organization ans  (a) Description of security or categor |   | m 990, Part IV, IIn<br>(b) Book value | 1                                      |  |
|                | (including name of security)   | ,                                       | (D) DOOK VARIUS                       |  | Method of valuation:<br>end-of-year market value |
|                | I derivatives  |   | 2,424,851,151                         | END OF YEAR                            | MARKET VALUE                                     |
|                | held equity interests  |   |                                       |  |  |
| (3) Other      |  | ****                                    | · · · · · · · · · · · · · · · · · · · |  |  |
| (A) EQUI       | TY, FIXED INCOME, REAL ASSETS, ETC                                       | *************************************** | 6,908,445,873                         | END OF YEAR                            | MARKET VALUE                                     |
| (C)            |  | *************************************** |                                       |  |  |
| (D)            |  | *************************************** | *******                               | <u> </u>                               | ·······  |
| (E)            | ***************************************                                  | *************************************** |                                       |  |  |
| (F)            |  | · · · · · · · · · · · · · · · · · · ·   |                                       |  |  |
| (G)            |  |   |                                       |  |  |
| (H)            | ~  |   |                                       |  |  |
|                | b) must equal Form 990, Part X, col. (B) line 12.) ▶                     |   | 9,333,297,024                         | 100                                    | CANA THE RESIDENCE OF THE SECOND                 |
| Part VIII      | Investments—Program Relate   |   |                                       | a <b>=</b>                             |  |
|                | Complete if the organization ans   | wered "Yes" on For                      |                                       |  |  |
|                | (a) Description of Investment  |   | (b) Book value                        |  | Method of valuation;<br>and-of-year market value |
| (1)            |  |   |                                       |  | and on your manner takes                         |
| (2)            |  |   |                                       |  |  |
| (3)            |  |   |                                       |  |  |
| (4)            |  |   |                                       |  |  |
| (5)            |  | ***                                     |                                       |  |  |
| (6)            |  |   |                                       |  |  |
|                |  | 7                                       |                                       |  |  |
| (8)            |  |   | ····                                  |  |  |
| (9)            | o) must equal Form 990, Part X, col. (B) line 13.)                       | *********                               |                                       |  |  |
| Part IX        | Other Assets.  |   |                                       |  |  |
|                | Complete if the organization ans   | wered "Yes" on For                      | m 990 Part IV line                    | a 11d See Fo                           | rm 990 Part Y line 15                            |
|                | (1   | ) Description                           | in ooo, raitiv, iii                   | 3 11u. 000 1 0                         | (b) Book value                                   |
| (1)            |  |   |                                       |  |  |
| (2)            |  |   |                                       | ************************************** | ***  |
| (3)            |  |   |                                       |  |  |
| (4)            |  |   | ····                                  |  |  |
| (5)            |  |   |                                       |  |  |
| (6)            |  |   |                                       |  |  |
| (8)            |  |   |                                       |  |  |
| (9)            |  |   |                                       |  |  |
|                | nn (b) must equal Form 990, Part X, co                                   | ol. (B) line 15.)                       |                                       |  | <b>&gt;</b>                                      |
| Part X         | Other Liabilities.   |   |                                       |  |  |
|                | Complete if the organization answ  | wered "Yes" on Fori                     | n 990, Part IV, line                  | 11e or 11f. S                          | ee Form 990, Part X.                             |
|                | line 25.   |   |                                       |  | ,  |
| 1.             | (a) Description of liability   | (b) Book value                          |                                       |  |  |
| (1) Federal in |  | 1,443                                   | ,376                                  |  |  |
|                | AYABLE, ACTUARIAL LIABILITY OF ANNUITIES PAYABLE                         | 154,743                                 |                                       |  | 2.200  |
|                | MENT ADVANCES FOR STUDENT LOANS ETIREMENT OBLIGATIONS                    | 19,077                                  |                                       |  |  |
|                | E BONDS - SERIES 2012  | 3,252                                   |                                       |  |  |
|                | E BONDS - SERIES 2013  | 199,086<br>563,401                      |                                       |  |  |
|                | BONDS - SERIES 2015  | 497,336                                 |                                       |  |  |
|                | BONDS - SERIES 2017  | 497,477                                 |                                       | un - 1911                              |  |
|                | DEBT PAYABLE - LINES OF CREDIT   | 115,000                                 | ······                                |  |  |
|                | must equal Form 990, Part X, col. (B) line 25.) 🕨                        | 2,050,818                               |                                       |  |  |

2,050,818,753

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

| Part                          | XI Reconciliation of Revenue per Audited Financial Stateme   | ents With Revenue  | per Return.                              |
|-------------------------------|--|--------------------|--|
|                               | Complete if the organization answered "Yes" on Form 990, I   | Part IV, line 12a. |  |
| 1                             | Total revenue, gains, and other support per audited financial statements   |                    | . 1                                      |
| 2                             | Amounts included on line 1 but not on Form 990, Part VIII, line 12:  | 1 1                |  |
| а                             | Net unrealized gains (iosses) on investments   | 2a                 |  |
| b                             | Donated services and use of facilities   | 2b                 |  |
| C                             | Recoverles of prior year grants  | 2c                 |  |
| d                             | Calci (Doddilo iii Carrini)  | 2d                 |  |
| e                             | Add lines 2a through 2d  |                    | . <u>2e</u>                              |
| 3                             | Subtract line 2e from line 1   |                    | - 3                                      |
| 4                             | Amounts included on Form 990, Part VIII, line 12, but not on line 1:   |                    |  |
| а                             | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a                 |  |
| b                             | Other (Describe in Part XIII.)   | 4b                 |  |
| C                             | Add lines 4a and 4b  |                    | ·   4c                                   |
| 5                             | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line   | 12.)               | .   5                                    |
| Part                          | XII Reconciliation of Expenses per Audited Financial Staten  | nents with Expense | s per Return.                            |
|                               | Complete if the organization answered "Yes" on Form 990,   | Part IV, line 12a. |  |
| 1                             | Total expenses and tooses per addition time in a state of the  |                    | - <u>1</u>                               |
| 2                             | Amounts included on line 1 but not on Form 990, Part IX, line 25:  | 1. 1               |  |
| а                             | Donated services and use of facilities   | 2a                 |  |
| b                             | Prior year adjustments   | 2b                 |  |
| C                             | Other losses   | 2c                 |  |
| d                             | Other (Describe in Part XIII.)   | 2d                 |  |
| е                             | Add lines 2a through 2d  |                    | . 2e                                     |
| 3                             | Subtract line 2e from line 1   |                    | . 3                                      |
| 4                             | Amounts included on Form 990, Part IX, line 25, but not on line 1:   | _                  |  |
| а                             | Investment expenses not included on Form 990, Part VIII, line 7b   | 48                 |  |
|                               |  |                    |  |
| b                             | Other (Describe in Part XIII.)   |                    |  |
|                               | Add lines 4a and 4b  |                    | . 4c                                     |
| С<br>5                        | Add lines 4a and 4b  |                    |  |
| c<br>5                        | Add lines 4a and 4b  | ne 18.)            | . 5                                      |
| 5<br>Part                     | Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  The descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1. | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.  The descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1. | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
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| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |
| 5<br>Part<br>Provid<br>2; Par | Add lines 4a and 4b  | ne 18.)            | . 5 and 2b; Part V, line 4; Part X, line |

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Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference - Identifier  | Explanation  |
|--|--|
| SCHEDULE D, PART III,<br>LINE 1A - ART<br>COLLECTIONS                  | EXPLANATION: THE UNIVERSITY DOES NOT CAPITALIZE COLLECTIONS. AS STATED IN THE UNIVERSITY NOTES TO THE FINANCIAL STATEMENTS, THE ACCOUNTING POLICY FOR LIBRARY COLLECTIONS IS TO EXPENSE ALL PURCHASES. MUSEUM PURCHASES ARE ACCOUNTED FOR SIMILARLY. GIFTS OF ART AND SIMILAR TANGIBLE PERSONAL PROPERTY ARE ACCOUNTED FOR AS GIFTS-IN-KIND.   |
| SCHEDULE D, PART V,<br>LINE 4 - INTENDED USES<br>OF ENDOWMENT FUNDS    | THE UNIVERSITY'S ENDOWMENT FUNDS PURPOSES INCLUDE INSTRUCTION, RESEARCH, LIBRARY COLLECTIONS, SCHOLARSHIPS AND AWARDS, AND BUILDING CONSTRUCTION.  |
| SCHEDULE D, PART X ~<br>LINE 1(4) - ASSET<br>RETIREMENT<br>OBLIGATIONS | THE UNIVERSITY RECORDS ALL KNOWN ASSET RETIREMENT OBLIGATIONS (ARO) FOR WHICH THE FAIR VALUE OF THE LIABILITY CAN BE REASONABLY ESTIMATED, INCLUDING CERTAIN OBLIGATIONS RELATING TO REGULATORY REMEDIATION. ARO COVERED INCLUDE THOSE FOR WHICH AN ENTITY HAS A LEGAL OBLIGATION TO PERFORM AN ASSET RETIREMENT ACTIVITY; HOWEVER, THE TIMING AND/OR METHOD OF SETTLING THE OBLIGATION ARE CONDITIONAL ON A FUTURE EVENT THAT MAY OR MAY NOT BE WITHIN THE CONTROL OF THE ENTITY. |
| SCHEDULE D, PART X,<br>LINE 2 - FIN 48 (ASC 740)<br>FOOTNOTE           | THE UNIVERSITY MAKES AN ASSESSMENT OF INDIVIDUAL TAX POSITIONS AND FOLLOWS A PROCESS FOR RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. TAX POSITIONS ARE EVALUATED ON WHETHER THEY MEET THE "MORE LIKELY THAN NOT" STANDARD FOR SUSTAINABILITY ON EXAMINATION BY TAX AUTHORITIES.  |

#### SCHEDULE E (Form 990 or 990-EZ)

**Schools** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for the latest information.

омв но. 1545-0047 20**17** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NORTHWESTERN UNIVERSITY

Employer Identification number 36-2167817

| -art   |   |          | 14=0     |    |
|--------|---|----------|----------|----|
| 1      | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?   | 1        | YES<br>✓ | NO |
| 2      | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?  | 2        | 1        |    |
| 3      | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II | 3        | 1        |    |
|        | POLICIES ARE INCLUDED IN STUDENT, FACULTY, AND STAFF HANDBOOKS AND THE STUDENT COURSE CATALOG. POLICIES ARE POSTED ON UNIVERSITY WEBSITES, POSTED THROUGHOUT CAMPUS INCLUDING STUDENT CENTERS AND THE ADMISSIONS OFFICE, AND DISTRIBUTED TO UNDERGRADUATE STUDENTS.   |          |          |    |
| 4      | Does the organization maintain the following?   |          |          |    |
| a<br>b | Records indicating the racial composition of the student body, faculty, and administrative staff?   | 4a       | 1        |    |
| С      | Coples of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?   | 4b<br>4c | 1        |    |
| d      | Copies of all material used by the organization or on its behalf to solicit contributions?  | 4d       | 1        |    |
|        |   |          |          |    |
| 5<br>a | Does the organization discriminate by race in any way with respect to: Students' rights or privileges?  | 5a       |          | 1  |
| b      | Admissions policies?  | 5b       |          | •  |
| С      | Employment of faculty or administrative staff?  | 5c       |          | •  |
| d      | Scholarships or other financial assistance?   | 5d       |          | 1  |
| е      | Educational policies?   | 5e       |          | 1  |
| f      | Use of facilities?  | 5f       |          | 1  |
| g      | Athletic programs?  | 5g       |          | 1  |
| h      | Other extracurricular activities?   | 5h       |          |    |
|        |   |          |          |    |
| 6a     | Does the organization receive any financial aid or assistance from a governmental agency?   | 6a<br>6b | -        |    |
| ь<br>7 | If you answered "Yes" on either line 6a or line 6b, explain on Part II.  Does the organization certify that it has compiled with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.  | 7        |          |    |

| Schedule E (Form 990 or 990-EZ) 2017             |  |   |  |  |
|--|--|---|--|--|
| Part II  | Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions. |   |  |  |
| (SEE STAT  | TEMENT)  |   |  |  |
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| Part II | Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6a, 6b, and 7, as applicable. Also provide any other additional information (see instructions). |
|---------|---|

| Return Reference - Identifier   | Explanation   |
|---|---|
| SCHEDULE E, PART I, LINE<br>6(A) - FINANCIAL AID OR<br>ASSISTANCE FROM A<br>GOVERNMENTAL AGENCY | THE UNIVERSITY RECEIVES FINANCIAL SUPPORT FROM AGENCIES OF THE FEDERAL AND STATE<br>GOVERNMENT FOR RESEARCH AND INSTRUCTIONAL PURPOSES, INCLUDING FOR FINANCIAL AID TO<br>STUDENTS.   |
| 7 - RACIAL<br>NONDISCRIMINATION<br>COMPLIANCE   | NORTHWESTERN UNIVERSITY DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION BY ANY MEMBER OF ITS COMMUNITY AGAINST ANY INDIVIDUAL ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, PREGNANCY, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, PARENTAL STATUS, MARITAL STATUS, AGE, DISABILITY, CITIZENSHIP STATUS, OR VETERAN STATUS, OR GENETIC INFORMATION, OR ANY OTHER CLASSIFICATION PROTECTED BY LAW IN MATTERS OF ADMISSIONS, EMPLOYMENT, HOUSING, OR SERVICES OR IN THE EDUCATIONAL PROGRAMS OR ACTIVITIES IT OPERATES. |

### **SCHEDULE F** (Form 990)

# Statement of Activities Outside the United States

2017 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Open to Public

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

Department of the Treasury Internal Revenue Service

Name of the organization NORTHWESTERN UNIVERSITY

Employer identification number 36-2167817

OMB No. 1545-0047

| Pal         | Form 990, Part IV, line                                |   | ies Outside   | the United States. Comp  | olete if the organization ans                                     | wered "Yes" on  |
|-------------|--|---|---|--|---|---|
| 1           | For grantmakers. Does the assistance, the grantees' el | organization<br>gibility for the          | e grants or as  | sistance, and the selection  | ount of its grants and other<br>oriteria used to award the        | _   |
|             | grants or assistance?                                  |   |   |  |   | ✓ Yes □ No  |
| 2           | For grantmakers. Describe assistance outside the Unite |   | the organizati  | on's procedures for monit  | toring the use of its grant                                       | s and other   |
| 3           | Activities per Region. (The fo                         | ollowing Part                             | I, line 3 table (   | can be duplicated if addition  | nal space is needed.)   |   |
|             | (a) Region   | (b) Number of<br>offices in the<br>region | (c) Number of<br>employees,<br>agents, and<br>Independent<br>contractors<br>in the region | (d) Activities conducted in the<br>region (by type) (such as,<br>fundraising, program services,<br>investments, grants to recipients<br>iocated in the region) | (e) if activity listed in (d) is                                  | (f) Total<br>expenditures for<br>and investments<br>in the region |
|             | MIDDLE EAST AND NORTH                                  |   |   | MAINTAINING OFFICES,<br>EMPLOYEES, OR AGENTS   | INTERNATIONAL CAMPUS IN DOHA,<br>QATAR FOR STUDENTS IN JOURNALISM |   |
| (1)         | AFRICA   | 1   | 424   |  | AND COMMUNICATION   | 50,641,657  |
| <b>/</b> 01 | EAST ASIA AND THE PACIFIC                              |   |   | GRANTMAKING  |   |   |
| (2)         | EUROPE (INCLUDING                                      | 0   | 0   | CDANITMAKINO   |   | 567,685   |
| (3)         | ICELAND AND GREENLAND)                                 | 0   | 0   | GRANTMAKING  |   | 2,497,282   |
| (4)         | MIDDLE EAST AND NORTH<br>AFRICA                        | 0   | 0   | GRANTMAKING  |   | 140,406   |
| (5)         | NORTH AMERICA (CANADA & MEXICO ONLY)                   | 0   | 0   | GRANTMAKING  |   | 789,948   |
|             | SOUTH AMERICA  |   |   | GRANTMAKING  |   |   |
| (6)         |  | 0   | 0   |  |   | 131,645   |
| (7)         | SOUTH ASIA   | 0   | 0   | GRANTMAKING  |   | 29,792  |
| (8)         | SUB-SAHARAN AFRICA                                     | o   | 0   | GRANTMAKING  |   | 662,277   |
| (9)         | EAST ASIA AND THE PACIFIC                              | 0   | 0   | PROGRAM-RELATED INVESTMENTS  |   | 10,000  |
| (10)        | EUROPE (INCLUDING<br>ICELAND AND GREENLAND)            | 0   | 0   | PROGRAM-RELATED INVESTMENTS  |   | 36,234  |
| (11)        | CENTRAL AMERICA AND THE CARIBBEAN                      | 0   | 0   | UNRELATED BUSINESS<br>ACTIVITIES   |   | 784   |
| (12)        | EAST ASIA AND THE PACIFIC                              | 0   | 0   | UNRELATED BUSINESS<br>ACTIVITIES   |   | 1,018   |
|             | EUROPE (INCLUDING<br>ICELAND AND GREENLAND)            | 0   | 0   | UNRELATED BUSINESS<br>ACTIVITIES   |   | 8,822   |
|             | MIDDLE EAST AND NORTH<br>AFRICA                        | 0   | 0   | UNRELATED BUSINESS<br>ACTIVITIES   |   | · · · · · · · · · · · · · · · · · · ·                             |
|             | NORTH AMERICA (CANADA & MEXICO ONLY)                   | 0   | 0   | UNRELATED BUSINESS<br>ACTIVITIES   |   | 2,947   |
| (13)        | SOUTH AMERICA  | U   | U   | UNRELATED BUSINESS   |   | 1,038   |
| (16)        | (OFF OTATEMENT)  | 0   | 0   | ACTIVITIES   |   | 416   |
| (17)        | (SEE STATEMENT)  |   |   |  |   |   |
| <b>3</b> a  | Sub-total  | 1   | 424   | Panis  |   | 55,521,951  |
| b           | Total from continuation sheets to Part I               | 0   | 0   |  |   | 3,155,936,530   |

c Totals (add lines 3a and 3b)

3,211,458,481

Page 2

Schedule F (Form 990) 2017

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

|                            | 2               |  |                                       |                             |  | ,                                      | 9. Occupation   | D Method of                   |
|----------------------------|-----------------|--|---------------------------------------|-----------------------------|--|--|---|-------------------------------|
| 1 (a) Name of organization | (if applicable) | roigat (c)                                     | (d) Purpose of<br>grant               | (e) Amount or<br>cash grant | (t) mariner or<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | of noncash assistance   | (book, FMV, appraisal, other) |
| £                          |                 | SOUTH ASIA                                     | SUPPORT OF CHARITABLE<br>ORGANIZATION | 12,500                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| Z                          |                 |  | SUPPORT OF RESEARCH<br>ACTIVITIES     | 29,006                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| 0                          |                 | EUROPE (INCLUDING<br>ICELAND AND<br>GREENLAND) | SUPPORT OF RESEARCH<br>ACTIVITIES     | 149,040                     | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| •                          |                 | NORTH AMERICA<br>(CANADA & MEXICO<br>ONLY)     | SUPPORT OF RESEARCH<br>ACTIVITIES     | 11,860                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| G                          |                 | NORTH AMERICA<br>(CANADA & MEXICO<br>ONLY)     | SUPPORT OF RESEARCH<br>ACTIVITIES     | 16,440                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| 9                          |                 | EUROPE (INCLUDING<br>ICELAND AND<br>GREENLAND) | SUPPORT OF RESEARCH<br>ACTIVITIES     | 41,382                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
|                            |                 | EUROPE (INCLUDING ICELAND AND GREENLAND)       | SUPPORT OF RESEARCH<br>ACTIVITIES     | 191,886                     | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| <u> </u>                   |                 | SUB-SAHARAN<br>AFRICA                          | SUPPORT OF RESEARCH<br>ACTIVITIES     | 148,735                     | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
|                            |                 | SUB-SAHARAN<br>AFRICA                          | SUPPORT OF RESEARCH<br>ACTIVITIES     | 43,951                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| (10)                       |                 | SUB-SAHARAN<br>AFRICA                          | SUPPORT OF RESEARCH<br>ACTIVITIES     | 20,941                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| Œ.                         |                 | NORTH AMERICA<br>(CANADA & MEXICO<br>ONLY)     | SUPPORT OF RESEARCH<br>ACTIVITIES     | 119,729                     | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| Z.                         |                 | NORTH AMERICA<br>(CANADA & MEXICO<br>ONLY)     | SUPPORT OF RESEARCH<br>ACTIVITIES     | 5,650                       | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| (13)                       |                 | MIDDLE EAST AND<br>NORTH AFRICA                | SUPPORT OF RESEARCH<br>ACTIVITIES     | 85,842                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| 14)                        |                 | EAST ASIA AND<br>THE PACIFIC                   | SUPPORT OF RESEARCH<br>ACTIVITIES     | 93,611                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  |   |                               |
| (15)                       |                 | SOUTH ASIA                                     | SUPPORT OF CHARITABLE<br>ORGANIZATION | 12,000                      | ACH DIRECT<br>DEPOSIT OR CHECK         |  | A DESCRIPTION OF THE PROPERTY |                               |
| (16)                       |                 | (SEE STATEMENT)                                |                                       |                             |  |  |   |                               |
|                            |                 |  |                                       |                             |  |  |   |                               |

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ო Ø

Enter total number of other organizations or entities

Schedule F (Form 990) 2017

36

Schedule F (Form 990) 2017

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

|   | i ar ill call de duplicated il additional space is   | is rieeded.  |                             |   |  |  |  |
|---|--|--|-----------------------------|---|--|--|--|
| (a) Type of grant or assistance   | (b) Region   | (c) Number of<br>recipients  | (d) Amount of<br>cash grant | (e) Manner of<br>cash<br>disbursement                     | (f) Amount of noncash assistance   | (g) Description of noncash assistance  | (h) Method of valuation (book, FMV, appraisal other  |
| GRANTS DISBURSED DURING<br>STUDENT'S ENROLLMENT N<br>(1) NTERNATIONAL PROGRAM | EAST ASIA AND THE<br>PACIFIC   | 23   | 355,701                     | APPL ED TO STUDENT<br>ACCOUNT, CREDITS<br>ARE REFUNDED BY | TV On the property of the last |  | (page language)  |
| GRANTS DISBURSED DURING STUDENTS ENROLLMENT N (2) NTERNATIONAL PROGRAM        | EUROPE (INCLUDING ICELAND AND GREENLAND)   | 151  | 1,969,507                   | APPL ED TO STUDENT<br>ACCOUNT; CREDITS<br>ARE REFUNDED BY |  |  | · Avenue de la companya de la companya de la companya de la companya de la companya de la companya de la compa   |
| GRANTS DISBURSED DURING STUDENTS ENROLLMENT N (3) NTERNATIONAL PROGRAM        | MIDDLE EAST AND NORTH<br>AFRICA  | က  | 25,558                      | APPLED TO STUDENT<br>ACCOUNT; CREDITS<br>ARE REFUNDED BY  | -processor and a second  |  | - CANADA PARA PARA PARA PARA PARA PARA PARA P  |
| GRANTS DISBURSED DURING<br>STUDENT'S ENROLLMENT N<br>(4) NTERNATIONAL PROGRAM | NORTH AMERICA (CANADA &<br>MEXICO ONLY)  | 4  | 722,7                       | APPL ED TO STUDENT<br>ACCOUNT; CREDITS<br>ARE REFUNDED BY |  |  | TO THE TWO   |
| GRANTS DISBURSED DURING STUDENT'S ENROLLMENT N (5) NTERNATIONAL PROGRAM       | SOUTH AMERICA  | 15   | 131,645                     | APPLED TO STUDENT<br>ACCOUNT; CREDITS<br>ARE REFUNDED BY  |  |  | NAME OF TAXABLE PARTY.   |
| GRANTS DISBURSED DURING STUDENT'S ENROLLMENT N (6) NTERNATIONAL PROGRAM       | SUB-SAHARAN AFRICA   | 16   | 121,970                     | APPL ED TO STUDENT<br>ACCOUNT; CREDITS<br>ARE REFUNDED BY |  | 7777 0000000000000000000000000000000000  | in maddada.  |
| (7)   | 7  |  |                             |   |  |  | - THE PROPERTY OF THE PROPERTY |
| (8)   |  |  |                             |   |  |  | THE TOTAL PROPERTY AND THE PROPERTY AND  |
| (6)   | 111111111111111111111111111111111111111  |  |                             |   | 777  | THE PARTY AND TH |  |
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| (13)  | TO AN AN AN AN AN AN AN AN AN AN AN AN AN  |  |                             |   |  | T TOTAL STATE OF THE STATE OF T |  |
| (14)  | Annunity   | - Application and Application  |                             |   |  | PRINTER ALL.   | 717.77   |
| (15)  |  |  |                             |   |  | T TOTAL TOTA | CHANGE CONTRACTOR CONT |
| (16)  | V VERTEX NORTH AND ADDRESS.  | , THE STATE OF THE |                             |   |  | THE PARTY OF THE P |  |
| (17)  | T TOTAL CONTROL LAND CONTROL C |  | - Annaham                   |   |  |  | (MANAGAMA)   |
| (18)  |  |  |                             |   |  |  | - предоставляний примента прим |
|   |  |  |                             |   |  | Sche   | Schedule F (Form 990) 2017   |

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| ⊃art l | V              | Foreign Forms  |       |      |
|--------|----------------|--|-------|------|
| 1      | the c          | the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)  | ✓ Yes | □ No |
| 2      | may<br>Trusi   | the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to separately file Form 3520, Annual Return To Report Transactions With Foreign ts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign twith a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | ☐ Yes | √ No |
| 3      | the c          | the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations (see Instructions for Form 5471)   | ✓ Yes | □ No |
| 4      | quali<br>Infor | the organization a direct or indirect shareholder of a passive foreign investment company or a lifted electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing if (see Instructions for Form 8621).   | ☑ Yes | □ No |
| 5      | the d          | the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Ign Partnerships (see Instructions for Form 8865)   | ✓ Yes | □ No |
| 6      | "Yes           | the organization have any operations in or related to any boycotting countries during the tax year? If ;" the organization may be required to separately file Form 5713, International Boycott Report (see uctions for Form 5713; don't file with Form 990)  | ✓ Yes | □ No |

| (a)  | (b)                                | (c)   | (d)  | (e)  | (f)  |
|--|------------------------------------|---|--|--|--|
| Region   | Number of offices in<br>the region | Number of<br>employees, agents,<br>and independent<br>contractors in region | in region (by type)<br>(e.g., fundraising, program | If activity listed in (d) is a program service, descr be specific type of service(s) in region           | Total expenditures<br>for and investments<br>in region |
| (17) SUB-SAHARAN AFRICA                          | 0                                  | 0   | UNRELATED BUSINESS<br>ACTIVIT ES                   |  | 682  |
| (18) CENTRAL AMERICA AND THE<br>CARIBBEAN        | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 88,836   |
| (19) EAST ASIA AND THE PACIFIC                   | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 1,842,974  |
| (20) EUROPE (INCLUDING ICELAND<br>AND GREENLAND) | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 3,657,880  |
| (21) MIDDLE EAST AND NORTH AFRICA                | 0                                  | 0   |  | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 914,437  |
| (22) NORTH AMERICA (CANADA &<br>MEXICO ONLY)     | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 554,279  |
| (23) RUSSIA AND NEIGHBORING<br>STATES            | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 66,142   |
| (24) SOUTH AMERICA                               | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 269,052  |
| (25) SOUTH ASIA                                  | 0                                  | 0   | PROGRAM SERVICES                                   | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 161,466  |

| (a)  | (b)                                | (c)   | (d)   | (e)  | (f)  |
|--|------------------------------------|---|---|--|--|
| Region   | Number of offices in<br>the region | Number of<br>employees, agents,<br>and independent<br>contractors in region | Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | If activity listed in (d) is a program service, descr be specific type of service(s) in region           | Total expenditures<br>for and investments<br>in region |
| (26) SUB-SAHARAN AFRICA                          | o                                  | 0   | PROGRAM SERVICES  | BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH- RELATED TRAVEL) | 351,397  |
| (27) CENTRAL AMERICA AND THE<br>CARIBBEAN        | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 577,681  |
| (28) EAST ASIA AND THE PACIFIC                   | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 2,280,988  |
| (29) EUROPE (INCLUDING ICELAND<br>AND GREENLAND) | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 3,769,835  |
| (30) MIDDLE EAST AND NORTH AFRICA                | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 1,044,384  |
| (31) NORTH AMERICA (CANADA & MEXICO ONLY)        | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 742,027  |
| (32) SOUTH AMERICA                               | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 411,156  |
| (33) SOUTH ASIA                                  | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 152,065  |
| (34) SUB-SAHARAN AFRICA                          | 0                                  | 0   | PROGRAM SERVICES  | STUDY ABROAD<br>PROGRAMS AND<br>COURSES<br>ABROAD  | 889,278  |
| (35) EAST ASIA AND THE PACIFIC                   | 0                                  | 0   | FUNDRAISING   |  | 210,288  |
| (36) EUROPE (INCLUDING ICELAND<br>AND GREENLAND) | 0                                  | 0   | FUNDRAISING   |  | 103,539  |
| (37) MIDDLE EAST AND NORTH AFRICA                | 0                                  | 0   | FUNDRAISING   |  | 17,296   |
| (38) NORTH AMERICA (CANADA &<br>MEXICO ONLY)     | 0                                  | 0   | FUNDRAISING   |  | 10,848   |
| (39) CENTRAL AMERICA AND THE<br>CARIBBEAN        | 0                                  | 0   | NVESTMENTS  |  | 2,586,000,000  |
| (40) EUROPE (INCLUDING ICELAND<br>AND GREENLAND) | 0                                  | 0   | NVESTMENTS  |  | 361,200,000  |
| (41) NORTH AMERICA (CANADA & MEXICO ONLY)        | 0                                  | 0   | NVESTMENTS  |  | 85,360,000   |
| (42) SUB-SAHARAN AFRICA                          | 0                                  | 0   | NVESTMENTS  |  | 105,260,000  |

| Part II | Grants and Other Assistance to Organizations or Entities Outside the United States | (continued) |
|---------|--|-------------|
|         |  | (00.,       |

| (a)                     | (b)                            | (c)   | (d)                                  | (e)                     | (f)                               | (g)                           | (h)                                | (i)   |
|-------------------------|--------------------------------|---|--------------------------------------|-------------------------|-----------------------------------|-------------------------------|------------------------------------|---|
| Name of<br>Organization | IRS code<br>section and<br>EIN | Region  | Purpose of grant                     | Amount of<br>cash grant | Manner of<br>cash<br>disbursement | Amount of non-cash assistance | Description of non-cash assistance | Method of<br>valuation (book,<br>FMV, apraisai,<br>other) |
| (16)                    |                                | SUB-SAHARAN<br>AFRICA                             | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 130,672                 | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (17)                    |                                | NORTH AMERICA<br>(CANADA &<br>MEXICO ONLY)        | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 9,230                   | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (18)                    |                                | NORTH AMERICA<br>(CANADA &<br>MEXICO ONLY)        | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 16,655                  | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (19)                    |                                | NORTH AMERICA<br>(CANADA &<br>MEXICO ONLY)        | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 22,753                  | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (20)                    |                                | NORTH AMERICA<br>(CANADA &<br>MEXICO ONLY)        | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 580,404                 | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (21)                    |                                | EAST ASIA AND<br>THE PACIFIC                      | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 118,373                 | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (22)                    |                                | SUB-SAHARAN<br>AFRICA                             | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 67,276                  | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (23)                    |                                | EUROPE<br>(INCLUDING<br>ICELAND AND<br>GREENLAND) | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 14,929                  | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (24)                    |                                | SUB-SAHARAN<br>AFRICA                             | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 22,317                  | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (25)                    |                                | SUB-SAHARAN<br>AFRICA                             | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 106,415                 | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (26)                    |                                | EUROPE<br>(INCLUDING<br>ICELAND AND<br>GREENLAND) | SUPPORT OF<br>RESEARCH<br>ACTIVITIES |                         | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |
| (27)                    |                                | SOUTH ASIA  | SUPPORT OF<br>RESEARCH<br>ACTIVITIES | 5,292                   | ACH DIRECT<br>DEPOSIT OR<br>CHECK |                               |                                    |   |

# Part V

Supplemental Information. Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

| Return Reference - Identifier  | Explanation  |
|--|--|
|  | THE PROGRAM SERVICES LISTED IN PART I REFLECT INTERNATIONAL EDUCATIONAL PROGRAMS IN WHICH THE UNIVERSITY HAS MATERIAL INVOLVEMENT IN THE DESIGN, DEVELOPMENT AND/OR CONTROL OF THE PROGRAM AND/OR CURRICULUM.  |
|  | WHILE NORTHWESTERN UNIVERSITY PROVIDES ITS STUDENTS WITH ACCESS TO A MULTITUDE OF STUDY ABROAD PROGRAMS AND EXCHANGES LOCATED THROUGHOUT THE WORLD, THE UNIVERSITY DOES NOT ADMINISTER OR OPERATE THE EDUCATIONAL COURSES TAUGHT BY ALL OF THESE PROGRAMS. RATHER, UNDER RECIPROCITY AND AFFILIATION AGREEMENTS, THE UNIVERSITY HELPS FACILITATE ITS STUDENTS' ACCESS TO SUCH INTERNATIONAL PROGRAMS AND RECOGNIZES CREDIT EARNED BY STUDENTS AT SUCH FOREIGN EDUCATIONAL INSTITUTIONS, AND SUCH EXCHANGE PROGRAMS ARE EXCLUDED FROM SCHEDULE F, PART I.   |
|  | UNDER NORTHWESTERN UNIVERSITY'S CURRENT ACCOUNTING PROCEDURES, ALL EXPENSES<br>ASSOCIATED WITH STUDY ABROAD PROGRAMS ARE NOT SEPARATELY TRACKED, AND THEREFORE SOME<br>EXPENDITURES PER PROGRAM ARE NOT LISTED IN PART I, COLUMN (F).  |
| SCHEDULE F, PART I, LINE<br>2 - PROCEDURES FOR<br>MONITORING USE OF<br>GRANT FUNDS                         | GRANTS OR OTHER ASSISTANCE ARE AWARDED TO FOREIGN ORGANIZATIONS OR ENTITIES PURSUANT TO THE UNIVERSITY POLICIES AND PROCEDURES FOR ALL GRANT SUBAWARDS. SUCH SUBAWARDS ARE MONITORED THROUGH THE UNIVERSITY'S OFFICE FOR SPONSORED RESEARCH (OSR) AND THE UNIVERSITY'S OFFICE OF ACCOUNTING SERVICES FOR RESEARCH AND SPONSORED PROGRAMS (ASRSP). ALL SUBAWARD DOCUMENTATION INCLUDING PURCHASE ORDERS, RELATED CHARGES AND INVOICES ARE REVIEWED AND MONITORED BY ASRSP AND CONFIRMED WITH THE PRINCIPAL INVESTIGATOR. THE PRINCIPAL INVESTIGATOR MUST CERTIFY THAT THE SUBAWARD COSTS ARE IN ACCORDANCE WITH THE OFFICE OF MANAGEMENT AND BUDGET'S (OMB) UNIFORM GUIDANCE (UNIFORM ADMINISTRATIVE REQUIREMENTS), COST PRINCIPLES, AND AUDIT REQUIREMENTS); ALSO, ASRSP REQUESTS AND COLLECTS AUDIT REPORTS FROM SUBAWARD RECIPIENTS TO MONITOR COMPLIANCE, AS REQUIRED BY THE UNIFORM GUIDANCE. IF THE INFORMATION IS NOT FURNISHED TO ASRSP, PAYMENT MAY BE WITHHELD. |
| 3 - METHOD TO ACCOUNT<br>FOR EXPENDITURES ON<br>ORG'S FINANCIAL<br>STATEMENTS                              | EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL RUSSIA AND NEIGHBORING STATES: ACCRUAL. SOUTH AMERICA: ACCRUAL SOUTH ASIA: ACCRUAL SOUTH ASIA: ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL  |
| 3 - PROGRAM-RELATED INVESTMENTS  | ENROLLMENT IN INTERNATIONAL PROGRAM.   |
| SCHEDULE F, PART I, LINE<br>3(F) - METHOD USED TO<br>ACCOUNT FOR<br>EXPENDITURES                           | EXPENDITURES REPORTED IN PART I ARE PREPARED USING THE ACCRUAL METHOD OF ACCOUNTING. UNIVERSITY ACTIVITIES ARE ASSIGNED A UNIQUE IDENTIFYING NUMBER. DIRECT EXPENSES ARE RECORDED WITH RESPECT TO EACH ACTIVITY IN THE UNIVERSITY'S ELECTRONIC FINANCIAL RECORDING SYSTEM. SUCH DIRECT EXPENSES, FOR THE RELEVANT TAX YEAR, ARE REFLECTED IN COLUMN (F)  |
| SCHEDULE F, PART II,<br>LINE 1 - METHOD TO<br>ACCOUNT FOR<br>EXPENDITURES ON ORG'S<br>FINANCIAL STATEMENTS | EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL SOUTH ASIA: ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL   |
| SCHEDULE F, PART II,<br>LINE 1 - METHOD USED<br>TO ACCOUNT FOR CASH<br>GRANTS                              | IN CONNECTION WITH THE MONITORING OF SUBAWARDS THROUGH OSR, APPROVED PURCHASE ORDERS AND INVOICES ARE DOCUMENTED AND ACCOUNTED FOR IN THE UNIVERSITY'S ELECTRONIC FINANCIAL RECORDING SYSTEM, AND SUCH AMOUNTS ARE REFLECTED IN PART II, LINE 1.   |
| GIVINIO  | OF THE 27 ORGANIZATIONS THAT RECEIVED GRANTS IN PART II, 19 ARE UNIVERSITIES, COLLEGES, AND HOSPITALS; 3 ARE RESEARCH CENTERS; ONE IS A HEALTHCARE NGO; AND ONE IS A SECTION 501(C)(3) ORGANIZATION.   |
| SCHEDULE F, PART III -<br>METHOD TO ACCOUNT<br>FOR EXPENDITURES ON<br>ORG'S FINANCIAL<br>STATEMENTS        | EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL SOUTH AMERICA: ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL  |
| SCHEDULE F, PART III(C) -<br>ESTIMATED NUMBER OF<br>RECIPIENTS   | CASH GRANTS GIVEN TO INDIVIDUALS ARE RECORDED IN AN ELECTRONIC REPORTING TOOL. THE DATA RECORDED INCLUDES INFORMATION AS TO PARTICIPATION BY UNDERGRADUATE STUDENTS IN STUDY ABROAD PROGRAMMING. INDIVIDUAL RECIPIENTS OF CASH GRANTS ARE CODED WITH UNIQUE IDENTIFYING NUMBERS. GRANTS ASSOCIATED WITH UNDERGRADUATE STUDENTS CODED AS PARTICIPATING IN A STUDY ABROAD ARE REVIEWED TO ASSESS WHETHER THERE IS AN OVERLAP BETWEEN THE GRANT DISBURSEMENT DATE AND THE DATE OF THE APPLICABLE STUDY ABROAD PROGRAM. THE NUMBER OF SUCH STUDENTS, BASED ON THEIR UNIQUE IDENTIFYING NUMBERS, ARE SUMMED AND REFLECTED IN PART III, COLUMN (C).  |

# **SCHEDULE G** (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundralsing or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury

► Atlach to Form 990 or Form 990-EZ.

Open to Public

| Name of the organization   | ► Go to www                              | v.lrs.gov/Form        | 990 for the la                           | atest instructions.               | ······   | Inspection  |
|--|--|-----------------------|--|-----------------------------------|--|---|
| Name of the organization NORTHWESTERN UNIVERSITY                                       |  |                       |  |                                   | Employer identific   |   |
| Part I Fundraising Activities  | Complete if the                          | o organiz             | ation once                               | ward (Vaal) aa l                  |  | 2167817   |
| Form 990-EZ filers are   |  |                       |  | vered "Yes" on I                  | -orm 990, Part IV, I   | ine 17.   |
| 1 Indicate whether the organizati  |  |                       |  | owing activities. C               | heck all that apply  |   |
| a 🗹 Mail solicitations   |  |                       |  | ion of non-govern                 |  |   |
| b 📝 Internet and email solicitation  | ons                                      | _                     |  | ion of government                 |  |   |
| c  Phone solicitations   |  | gŪ                    |  | fundraising events                | _  |   |
| d In-person solicitations  |  | • -                   | - •                                      | J                                 |  |   |
| 2a Did the organization have a wri   | tten or oral agre                        | ement with            | any individ                              | dual (including offi              | cers, directors, truste  | es,   |
| or key employees listed in Forn  | n 990, Part VII) o                       | r entity in co        | onnection v                              | with professional f               | undraising services?   | ✓ Yes ☐ No  |
| b If "Yes," list the 10 highest pale<br>compensated at least \$5,000 b                 | f individuals or a<br>y the organization | entities (fund<br>en. | draisers) pu                             | ursuant to agreem                 | ents under which the   | fundraiser is to be                                     |
| (i) Name and address of individual or entity (fundralser)                              | (ii) Activity                            | custody o             | draiser have<br>r control of<br>outlons? | (Iv) Gross receipts from activity | (v) Amount paid to<br>(or relained by)<br>fundraiser listed in<br>col. (i) | (vi) Amount paid to<br>(or retained by)<br>organization |
|  |  | Yes                   | No                                       |                                   |  |   |
| 1 ALEXANDER ROSS GROUP, 2406   | (SEE                                     |                       |  | 1                                 |  |   |
| PRAIRIE AVE, EVANSTON, IL 60201  | STATEMENT)                               |                       | ✓  |                                   | 97,837   |   |
| 2 ELISA LEWIS KLINE, 578 WOODLAND<br>LANE N, NORTHFIELD, IL 60093                      | (SEE<br>STATEMENT)                       |                       | <b>4</b>                                 |                                   | 23,769   |   |
| 3 MARCY B. WALD NGER CONSULTING, LLC,<br>3228 WEST DOBSON PLACE, ANN ARBOR, M<br>48105 | (SEE<br>STATEMENT)                       |                       | <b>4</b>                                 |                                   | 43,133   |   |
| 4 MEETING ACHIEVEMENTS INC., 232<br>E 500 N, VALPARAISO, IN 46383                      | (SEE<br>STATEMENT)                       | <b>✓</b>              |  | 824,575                           | 125,183  | 699,392   |
| 5 STELTER, 10435 NEW YORK<br>AVE., DES MOINES, IA 50322                                | (SEE<br>STATEMENT)                       |                       | <b>✓</b>                                 |                                   | 119,960  |   |
| 6 TIMOTHY VOLPE, 1360 VERANO<br>DRIVE, PALM SPRINGS, CA 92264                          | (SEE<br>STATEMENT)                       |                       | <b>√</b>                                 |                                   | 14,587   |   |
| 7  |  |                       |  |                                   | 14,507   |   |
| 8  |  |                       |  |                                   |  |   |
| 9  |  |                       |  |                                   |  | -7-110010000  |
| 10   |  |                       |  |                                   |  | ***************************************                 |
| Total  |  |                       |  | 824,575                           | 424,469  | 200 202   |
| List all states in which the orgal registration or licensing.                          | nization is regis                        | tered or lice         | ensed to so                              | olicit contributions              | s or has been notified   | 699,392<br>I it is exempt from                          |
| AL, AK, AZ, CA, CO, CT, DE, DC, FL, GA, I  | HI, ID, IL, IN, IA, K                    | S, KY, LA, MI         | E, MD, MA. I                             | MI, MN, MS, MO. M                 | T. NE. NV. NH.   |   |
| NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI,  | SC, SD, TN, TX, U                        | JT, VT, VA, V         | VA, WV, WI                               | WY                                |  |   |
|  |  |                       |  |                                   |  | ***************************************                 |
|  |  |                       |  |                                   |  | *****   |
|  |  |                       |  |                                   |  |   |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~  |  |                       |  |                                   |  |   |
|  |  |                       |  |                                   |  | <del></del>   |

| Pa              | ırt II   | Fundraising Events. Con<br>than \$15,000 of fundraisin<br>gross receipts greater tha  | ng event contributions                     | on answered "Yes" on<br>and gross income on      | Form 990, Part IV, line<br>Form 990-EZ, lines 1 a | e 18, or reported more<br>and 6b. List events with     |
|-----------------|----------|---|--|--|---|--|
|                 |          | <u> </u>  | (a) Event #1  DANCE MARATHON  (event type) | (b) Event #2 GLOBAL HEALTH BENEFIT (event type)  | (c) Other events  13 (total number)               | (d) Total events<br>(add col. (a) through<br>col. (c)) |
| Revenue         | 1        | Gross receipts  | 1,286,421                                  | 802,560  | 1,431,231   | 3,520,212  |
| æ               | 2        | Less: Contributions   | 1,047,548                                  | 787,380  | 895,386   | 2,730,314  |
|                 | 3        | Gross income (line 1 minus line 2)  | 238,873                                    | 15,180   | 535,845   | 789,898  |
|                 | 4        | Cash prizes   | 0  | 0  | 0   | 0  |
|                 | 5        | Noncash prizes  | 0  | 0  | 0   | 0  |
| Ses             | 6        | Rent/facility costs   | 104,285                                    | 0  | 139,350   | 243,635  |
| Direct Expenses | 7        | Food and beverages  | 0  | 66,641   | 150,540   | 217,181  |
| Direct          | 8        | Entertainment   |  | 900  | 7,749   | 8,649  |
|                 | 9        | Other direct expenses .   | 15,689                                     | 28,446   | 125,471   | 169,606  |
| 6               | 10<br>11 | Direct expense summary. Ac<br>Net income summary. Subtra<br>Gaming. Complete if the   | act line 10 from line 3, c                 | olumn (d)  | <i></i> •   | 639,071<br>150,827                                     |
| F6              | rt III   | than \$15,000 on Form 9   |  |  | 10,1 art 10, mile 10, 01                          | AVAIIANT   |
| Revenue         |          |   | (a) Bingo                                  | (b) Pull tabs/instant<br>bingo/progressive bingo | (c) Other gaming                                  | (d) Total gaming (add<br>col. (a) through col. (c))    |
| <u>—</u>        | 1        | Gross revenue   |  |  |   |  |
| 88              | 2        | Cash prizes   |  |  |   |  |
| Expenses        | 3        | Noncash prizes  |  |  |   |  |
| Direct E        | 4        | Rent/facility costs   | ***************************************    |  |   |  |
|                 | 5        | Other direct expenses .   | 9/   | <b>□ V</b> Δe %                                  | □ Vas %   |  |
|                 | 6        | Volunteer labor   | ☐ Yes% ☐ No                                | ☐ Yes% ☐ No                                      | ☐ Yes% ☐ No                                       |  |
|                 | 7        | Direct expense summary. Ac  | dd lines 2 through 5 in c                  | olumn (d)  |   |  |
|                 | 8        | Net gaming income summar  | y. Subtract line 7 from l                  | ine 1, column (d)                                |   |  |
| g               | a Is     | nter the state(s) in which the or<br>the organization licensed to c<br>"No," explain: |  | s in each of these state                         |   | 🗌 Yes 🗌 No   |
| 10              |          | ere any of the organization's of  | gaming licenses revoked                    |  |   | 7 . ☐ Yes ☐ No   |

| Schedu   | ле G (Form 990 or 990-EZ) 2017 Page €   |
|----------|---|
| 11<br>12 | Does the organization conduct gaming activities with nonmembers?  |
| 13       | Indicate the percentage of gaming activity conducted in:  |
| a        | The organization's facility   |
| 14       | An outside facility   |
| 14       | Enter the name and address of the person who prepares the organization's gaming/special events books and records:   |
|          | Name ►  |
|          | Address ▶   |
| 15a      | Does the organization have a contract with a third party from whom the organization receives garning revenue?   |
| b        | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ lif "Yes," enter name and address of the third party:                                  |
| J        | Name ►  |
|          | Address ►   |
| 16       | Gaming manager information:   |
|          | Name▶   |
|          | Garning manager compensation ▶ \$   |
|          | Description of services provided ►  |
|          | □ Director/officer □ Employee □ Independent contractor  |
| 17<br>a  | Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?   |
| b        | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$  |
| Part     | Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. |
| SEE N    | EXT PAGE  |
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Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

| Return Reference - Identifier  | Explanation Explanation   |
|--|---|
| SCHEDULE G, PART I,<br>LINE 2B(II) - LINE 2B<br>COLUMN (II) ACTIVITY 1 | FUNDRAISING CAMPAIGN CONSULTANT   |
| SCHEDULE G, PART I,<br>LINE 2B(II) - LINE 2B<br>COLUMN (II) ACTIVITY 1 | FUNDRAISING CAMPAIGN CONSULTANT   |
| SCHEDULE G, PART I,<br>LINE 2B(II) - LINE 2B<br>COLUMN (II) ACTIVITY 1 | GRANT APPLICATION ASSISTANCE  |
| SCHEDULE G, PART I,<br>LINE 2B(II) - LINE 2B<br>COLUMN (II) ACTIVITY 1 | SYMPOSIUM SPONSORSHIP SOLICITOR   |
| SCHEDULE G, PART I,<br>LINE 2B(II) - LINE 2B<br>COLUMN (II) ACTIVITY 1 | FUNDRAISING MARKETING CONSULTANT  |
| SCHEDULE G, PART I,<br>LINE 2B(II) - LINE 2B<br>COLUMN (II) ACTIVITY 1 | GRANT APPLICATION ASSISTANCE  |
| SCHEDULE G, PART I,<br>LINE 2B(III) - CUSTODY OF<br>FUNDS              | MEETING ACHIEVEMENTS RECEIVED \$230,000 OF FUNDS ON BEHALF<br>OF THE UNIVERSITY AND REMITTED THE ENTIRE AMOUNT TO THE UNIVERSITY.   |
| SCHEDULE G, PART I,<br>LINE 2B(V) -<br>REIMBURSEMENT OF<br>EXPENSES    | THE FOLLOWING PROFESSIONAL FUNDRAISERS RECEIVED REIMBURSEMENTS FOR EXPENSES ASSOCIATED WITH THEIR SERVICES TO THE UNIVERSITY (THE AMOUNT OF EXPENSES REIMBURSED AS REFLECTED): ALEXANDER ROSS GROUP (\$4,892), MARCY B. WALDINGER CONSULTING LLC (\$1,533), MEETING ACHIEVEMENTS (\$1,914), AND STELTER (\$11,663), ALL IN ACCORDANCE WITH WRITTEN AGREEMENTS SPECIFYING REIMBURSEMENT OF EXPENSES. |
| SCHEDULE G, PART I,<br>LINE 3 - STATE<br>SOLICITATION<br>REGISTRATIONS | NO REGISTRATION IS REQUIRED IN ARIZONA, DELAWARE, IDAHO, INDIANA, IOWA, NEBRASKA, SOUTH DAKOTA, TEXAS, VERMONT, AND WYOMING.  |

| Return Reference               | Identifier  | Ехрі                                    | anation  |
|--------------------------------|---|---|--|
| SCHEDULE G, PART I,<br>LINE 2B | PAYMENT OF FEES OR<br>PAYMENT OF EXPENSES         | Name ALEXANDER ROSS GROUP               | Description  ALEXANDER ROSS GROUP RECEIVED \$4,892 FOR EXPENSES AS AGREED IN ASSOCIATION WITH SERVICES TO THE UNIVERSITY.  |
| SCHEDULE G, PART I,<br>LINE 2B | PAYMENT OF FEES OR<br>PAYMENT OF EXPENSES         | Name MARCY B. WALDINGER CONSULTING, LLC | Description  MARCY B. WALDINGER CONSULTING, LLC RECEIVED REIMBURSEMENTS FOR EXPENSES OF \$1,533 AS AGREED IN ASSOCIATION WITH SERVICES TO THE UNIVERSITY.        |
| SCHEDULE G, PART I,<br>LINE 2B | DESCRIBE THE<br>CUSTODY OR CONTROL<br>ARRANGEMENT | Name MEETING ACHIEVEMENTS INC.          | Description  MEETING ACHIEVEMENTS RECEIVED \$230,000 OF FUNDS ON BEHALF OF THE UNIVERSITY AND REMITTED THE ENTIRE AMOUNT TO THE UNIVERSITY.                      |
| SCHEDULE G, PART I,<br>LINE 2B | PAYMENT OF FEES OR<br>PAYMENT OF EXPENSES         | Name MEETING ACHIEVEMENTS INC.          | Description  MEETING ACHIEVEMENTS RECEIVED REIMBURSEMENTS FOR EXPENSES OF \$1,914 AS AGREED IN ASSOCIATION WITH SERVICES TO THE UNIVERSITY.                      |
| SCHEDULE G, PART I,<br>LINE 2B | PAYMENT OF FEES OR<br>PAYMENT OF EXPENSES         | Name<br>STELTER                         | Description STELTER RECEIVED REIMBURSEMENTS FOR EXPENSES OF \$11,663 AS AGREED FOR PRINTING AND POSTAGE IN ASSOCIATION WITH SERVICES PROVIDED TO THE UNIVERSITY. |

**SCHEDULE 1** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Open to Public Inspection 2017

Employer Identification number

OMB No. 1545-0047

► Go to www.irs.gov/Form990 for the latest information.

| NORTHWESTERN UNIVERSITY   |                       |                                    |                                     |                                       |   |  | 36-2167817                            |
|---|-----------------------|------------------------------------|-------------------------------------|---------------------------------------|---|--|---------------------------------------|
| Part   General Information on Grants and Assistan   | on Grants and         | Assistance                         |                                     |                                       |   |  |                                       |
| Does the organization maintain records to substantiate the condition reference to such the condition of secietary.  | in records to subs    | stantiate the amou                 | int of the grants or                | assistance, the g                     | rantees' eligibility fo                                     | le amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and   | and Section 1985                      |
|   | वस्त्रवात गाह प्राचात | assistance:                        |                                     |                                       |   |  |                                       |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.   | ization's procedur    | es for monitoring                  | the use of grant ful                | nds in the United                     | States.   |  |                                       |
| Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization ans 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. | ssistance to Do       | mestic Organiz<br>that received m  | ations and Dom<br>ore than \$5.000. | iestic Governm<br>Part II can be di   | i <b>ents.</b> Complete r<br>uplicated if additi            | Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. | ared "Yes" on Form                    |
| 1 (a) Name and address of organization or government  | NE (a)                | (c) IRC section<br>(ff applicable) | (d) Amount of cash<br>grant         | (e) Amount of non-<br>cash assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | (g) Description of<br>noncash assistance   | (h) Purpose of grant<br>or assistance |
| (1) ACCESS COMMUNITY HEALTH NETWORK   |                       |                                    |                                     |                                       |   |  |                                       |
| 222 N CANAL ST, CHICAGO, IL 60606   | 36-3317058            | 501(C)(3)                          | 69,918                              |                                       |   |  | (SEE STATEMENT)                       |
| (2) (SEE STATEMENT)   |                       |                                    |                                     |                                       |   |  |                                       |
|   | 36-6210902            | 501(C)(3)                          | 69,064                              |                                       |   |  | (SEE STATEMENT)                       |
| (3) ADVENTIST HEALTH SYSTEMSUNBELT, INC.  |                       |                                    | 1                                   |                                       |   |  | درجوم والمتالية والمتالية والمتالية   |
| 601 E. ROLLINS ST., ORLANDO, FL 32803   | 59-1479658            | 501(C)(3)                          | 6,649                               |                                       |   |  | (SEE STATEMENT)                       |
| (4) (SEE STATEMENT)   |                       |                                    |                                     |                                       |   |  |                                       |
|   | 35-1341437            | 501(C)(3)                          | 16,702                              |                                       |   |  | (SEE STATEMENT)                       |
| (5) AHS HOSPITAL CORP.  |                       |                                    |                                     |                                       |   |  |                                       |
| 475 SOUTH STREET, MORRISTOWN, NJ 07962  | 52-1958352            |                                    | 22,620                              |                                       |   |  | (SEE STATEMENT)                       |
| (6) AIDS ARMS, INC.   |                       |                                    |                                     |                                       |   |  |                                       |
| 219 SUNSET AVE, DALLAS, TX 75208  | 75-2306145            | 501(C)(3)                          | 326,105                             |                                       |   |  | (SEE STATEMENT)                       |
| (7) (SEE STATEMENT)   |                       |                                    |                                     |                                       |   |  |                                       |
|   | 36-3412054            | 501(C)(3)                          | 6,259                               |                                       |   |  | (SEE STATEMENT)                       |
| (8) ALBANY MEDICAL COLLEGE  |                       |                                    |                                     |                                       |   |  |                                       |
| 47 NEW SCOTLAND AVE, MC70, ALBANY, NY 12208   | 14-1338310            | 501(C)(3)                          | 13,655                              |                                       |   |  | (SEE STATEMENT)                       |
| (9) ALBERT ENSTEIN COLLEGE OF MEDICINE, INC.  |                       |                                    |                                     |                                       |   |  |                                       |
| 1300 MORRIS PARK AVENUE, BRONX, NY 10461  | 47-2209056            | 501(C)(3)                          | 48,141                              |                                       |   |  | (SEE STATEMENT)                       |
| (10) (SEE STATEMENT)  |                       |                                    |                                     |                                       |   |  |                                       |
|   | 36-4444309            |                                    | 1,291,684                           |                                       |   |  | (SEE STATEMENT)                       |
| (11) (SEE STATEMENT)  |                       |                                    |                                     |                                       |   |  |                                       |
|   | 25-0965219            | 501(C)(3)                          | 86,759                              |                                       |   |  | (SEE STATEMENT)                       |
| (12) (SEE STATEMENT)  |                       |                                    |                                     |                                       |   |  |                                       |
|   |                       |                                    |                                     |                                       |   |  | A.F. C                                |
|   | n 501(c)(3) and gov   | remment organiza                   | itions listed in the l              | ine 1 table                           |   |  | . 🔻                                   |
| 3 Enter total number of other organizations listed in the line 1 table  | organizations listec  | d in the line 1 table              |                                     |                                       |   |  | 41                                    |
| For Paperwork Reduction Act Notice, see the Instructions for Form   | see the instruction   | is for Form 990.                   |                                     | O                                     | Cat. No. 50055P   |  | Schedule I (Form 990) (2017)          |

Page 2

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2017)
Part III Grants an

| Tal in call de duplicated il additioniai space is   | i space is needed.   |   |  | ***************************************   |  |
|---|--|---|--|---|--|
| (a) Type of grant or assistance   | (b) Number of<br>recipients  | (c) Amount of cash grant  | (d) Amount of noncash assistance   | (e) Method of valuation (book, FMV, appraisal, other)   | (f) Description of noncash assistance  |
| 1 (SEE STATEMENT)   | 18,261   | 398,534,261   | 186,176  | ВООК  | WINTER GEAR AND COMPUTERS  |
| 2 (SEE STATEMENT)   | 228  | 490,396   |  |   | THE LA LA LA LA LA LA LA LA LA LA LA LA LA   |
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| Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. | the information r  | equired in Part I, line   | 32; Part III, column   | (b); and any other addit  | ional information.   |
| (SEE STATEMENT)   |  |   |  |   | TOTAL  |
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|   |  | - propagation   | ***************************************  |   | Schedule I (Form 990) (2017)   |

# Part II

Grants and Other Assistance to Governments and Organizations in the United States (continued)

| (h) | Purpose of grant or assistance                    | SUPPORT OF RESEARCH ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES                                   | SUPPORT OF RESEARCH ACTIVITIES                                       | SUPPORT OF RESEARCH ACTIVITIES                                       | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES   | SUPPORT OF RESEARCH ACTIVITIES                             | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH ACTIVITIES                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                                | SUPPORT OF RESEARCH<br>ACTIVITIES                                    | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES   |
|-----|---|---|--|--|--|---|--|--|--|--|---|--|--|--|--|--|--|---|
| (b) | Description of non-cash assistance                |   |  |  |  |   |  |  |  |  |   |  |  |  |  |  |  |   |
| (J) | Method of valuation (book, FMV, appraisal, other) |   |  |  |  |   |  |  |  |  |   |  |  |  |  |  |  |   |
| (e) | Amount of non-cash assistance                     |   |  |  |  |   |  |  |  |  |   |  |  |  |  |  |  |   |
| (p) | Amount of cash grant                              | 264,512   | 4,632,908  | 14,764   | 8,752  | 12,390  | 5,020  | 93,447   | 123,387  | 22,298   | 924,908   | 562,671  | 59,610   | 573,754  | 5,610  | 117,847  | 20,374   | 179,237   |
| (0) | IRC section if applicable                         | 501(C)(3)   | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)   | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)   | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 115  | 115   |
| (p) | Z<br>Ü  | 36-6080517  | 36-2170833   | 86-0196696   | 58-1418202   | 45-0233470  | 59-0910342   | 74-1613878   | 74-1613878   | 95-3432210   | 04-3314093  | 04-2103547   | 36-2166997   | 04-2312909   | 87-0217280   | 05-0258809   | 95-2081258   | 95-4358677  |
| (a) | Name and address of organization or<br>government | (12) AMERICAN MEDICAL ASSOCIATION<br>515 N. STATE STREET, CHICAGO, IL 60654 | (13) ANN & ROBERT H. LURIE CHILDREN'S<br>HOSPITAL OF CHICAGO<br>225 E CHICAGO AVENUE, CHICAGO, IL<br>60611 | (14) ARIZONA STATE UNIVERSITY<br>OFFICE OF RESEARCH AND SPON. PROJ.,<br>PO BOX 876011, TEMPE, AZ 85287 | (15) AUGUSTA UNIVERSITY RESEARCH<br>INSTITUTE, INC.<br>PO BOX 945552, ATLANTA, GA 30394-5552 | (16) BANNER HEALTH<br>10515 W SANTA FE DRIVE, SUN CITY, AZ<br>85351 | (17) BAPTIST HOSPITAL OF MIAMI<br>8900 N KENDALL DR, MIAMI, FL 33176 | (18) BAYLOR COLLEGE OF MEDICINE<br>1 BAYLOR PLAZA, HOUSTON, TX 77030 | (19) BAYLOR RESEARCH INSTITUTE<br>3310 LIVE OAK STREET, SUITE 501,<br>DALLAS, TX 75204 | (20) BECKMAN RESEARCH INSTITUTE OF<br>THE CITY OF HOPE<br>1500 EAST DUARTE ROAD, DUARTE, CA<br>91010 | (21) BOSTON MEDICAL CENTER<br>ONE BOSTON MEDICAL CENTER PL,<br>BOSTON, MA 02118 | (22) BOSTON UNIVERSITY<br>ONE SILBER WAY, BOSTON, MA 02115 | (23) BOYS & GIRLS CLUBS OF CHICAGO<br>550 W. VAN BUREN STREET, SUITE 350,<br>CHICAGO, IL 60607 | (24) BRIGHAM AND WOMEN'S HOSPITAL<br>76 FRANCIS ST, BOSTON, MA 02115 | (25) BRIGHAM YOUNG UNIVERSITY<br>A-285 ASB, PROVO, UT 84602-1231 | (26) BROWN UNIVERSITY<br>45 PROSPECT STREET, PROVIDENCE, RI<br>02912 | (27) CALIFORNIA STATE UNIVERSITY, FULLERTON 800 NORTH STATE COLLEGE BLVD., FULLERTON. CA 92831 | (28) CALIFORNIA STATE UNIVERSITY,<br>NORTHRIDGE<br>18111 NORDHOFF STREET, NORTHRIDGE,<br>CA 91330 |

| (a)   | (a)        | (c)  | (p)                  | (e)                           | €   | (6)  | (h)                               |
|---|------------|--|----------------------|-------------------------------|---|--|-----------------------------------|
| Name and address of organization or<br>government   | EIN        | IRC section if applicable  | Amount of cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (29) CAMPBELL-KIBLER ASSOCIATES, INC.<br>80 LAKESIDE DR, GROTON, MA 01450   | 04-3297519 | TITLE OF THE STATE | 16,540               |                               |   | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH ACTIVITIES    |
| (30) CANFIELD SCIENTIFIC, INC.<br>253 PASSAIC AVENUE, FAIRFIELD, NJ<br>07004-2524   | 22-2938062 |  | 7,078                |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (31) CARDIAC SURGERY CLINICAL<br>RESEARCH CENTER, INC.<br>4400 WEST 95TH ST., SUITE 205, OAK<br>LAWN, IL 60453              | 36-4437722 | 501(C)(3)  | 18,667               |                               |   | TOTAL STATE OF THE | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (32) CAREIT HEALTH, LLC<br>5307 S HYDE PARK BLVD, UNIT 2N,<br>CHICAGO, IL 60615   | 37-1760920 |  | 56,216               | - Landerson                   |   | AVANCA DA  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (33) CARNEGIE MELLON UNIVERSITY<br>5000 FORBES AVE, PITTSBURGH, PA 15213  | 25-0969449 | 501(C)(3)  | 48,093               |                               | ***************************************           | TO THE PROPERTY AND ASSESSMENT TO THE PROPERTY T | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (34) CASE WESTERN RESERVE<br>UNIVERSITY<br>10900 EUCLID AVE, CLEVELAND, OH 44106  | 34-1018992 | 501(C)(3)  | 15,093               |                               |   | TOTAL AND THE STATE OF THE STAT | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (35) CEDARS-SINAI MEDICAL CENTER<br>8700 BEVERLY BLVD, HOLLYWOOD, CA<br>90048   | 95-1644600 | 501(C)(3)  | 465,106              |                               | T T T T T T T T T T T T T T T T T T T             | 170  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (36) CENTER ON HALSTED<br>3656 HALSTED STREET, CHICAGO, IL 60613  | 51-0178807 | 501(C)(3)  | 9,057                |                               |   | THE THE PARTY AND ADDRESS OF THE PARTY AND ADD | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (37) CHICAGO ACADEMY OF SCIENCES<br>2430 NORTH CANNON DRIVE, CHICAGO, IL<br>60614   | 36-0895575 | 501(C)(3)  | 25,000               |                               |   | 77747777474  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (38) CHICAGO ASSOCIATION FOR RESEARCH AND EDUCATION IN SCIENCE 5000 S. 5TH AVENUE, BUILDING ONE, ROOM C303, HINES, IL 60141 | 36-3334177 | 501(C)(3)  | 47,910               |                               |   | T T T T T T T T T T T T T T T T T T T  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (39) CHICAGO BOTANIC GARDEN<br>1000 LAKE COOK ROAD, GLENCOE, IL<br>60022  | 36-2225482 | 501(C)(3)  | 415,000              |                               |   | THE PARTY OF THE P | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (40) CHILDREN'S HOSPITAL BOSTON<br>300 LONGWOOD AVENUE, BOSTON, MA<br>02/15-5724  | 04-2774441 | 501(C)(3)  | 161,146              |                               | 1   | 1000   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (41) CHILDREN'S HOSPITAL LOS ANGELES<br>4650 SUNSET BLVD., MAIL STOP #97, LOS<br>ANGELES, CA 90027                          | 95-6121916 | 501(C)(3)  | 9,278                |                               | 1111WARA 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1      |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (42) CHILDREN'S HOSPITAL OF<br>PHILADELPHIA<br>34TH STREET AND CIVIC CENTER BLVD,<br>PHILADELPHIA, PA 19104                 | 23-1352166 | 501(C)(3)  | 278,467              |                               |   | STATE OF THE STATE | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (43) CHILDREN'S RESEARCH INSTITUTE<br>111 MICHIGAN AVE, NW, WASHINGTON, DC<br>20010   | 52-1654453 | 501(C)(3)  | 192,297              |                               | 777.44  | TOTAL CANADA   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (44) CHINESE AMERICAN SERVICE LEAGUE<br>2141 S TAN CT, CHICAGO, IL 60616  | 36-2984043 | 501(C)(3)  | 78,327               |                               |   | THE THE THE THE THE THE THE THE THE THE  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (45) CINCINNATI CHILDREN'S HOSPITAL<br>MEDICAL CENTER<br>3333 BURNET AVE, CINCINNATI, OH 45229                              | 31~0833936 | 501(C)(3)  | 261,893              |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   |            |  |                      |                               |   |  |                                   |
|   |            |  |                      |                               |   |  |                                   |

| (a)  | (p)        | (2)                       | (p)                  | (e)                           | (£)   | (6)                                   | (h)  |
|--|------------|---------------------------|----------------------|-------------------------------|---|---------------------------------------|--|
| Name and address of organization or<br>government  | Z          | IRC section if applicable | Amount of cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance | Purpose of grant or assistance                                 |
| (46) CITIZENS UNITED FOR RESEARCH IN EPILEPSY 430 WEST ERIE STREET, 210, CHICAGO, IL 60654           | 36-4253176 | 501(C)(3)                 | 6,000                |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (47) CITY OF EVANSTON<br>2100 RIDGE AVE, EVANSTON, IL 60201  | 36-6005870 | 115                       | 1,000,000            |                               |   |                                       | SUPPORT OF COMMMUNITY ORGANIZATION                             |
| (48) CJE SENIORLIFE<br>BERNARD HORWICH BUILDING, 3003 W.<br>TOUHY AVE., CHICAGO, IL 60645            | 36-2727597 | 501(C)(3)                 | 16,228               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (49) CLARK UNIVERSITY<br>950 MAIN STREET, WORCESTER, MA 01610  | 04-2111203 | 501(C)(3)                 | 53,965               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (6) CLEMSON UNIVERSITY<br>300 BRACKETT HALL, 321 CALHOUN DRIVE,<br>CLEMSON, SC 29634                 | 57-6000254 | 115                       | 6,608                |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (61) CLEVELAND CLINIC<br>9500 EUCLID AVENUE, CLEVELAND, OH<br>44195                                  | 34-0714585 | 501(C)(3)                 | 166,554              |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (82) CLINICAL DIRECTORS NETWORK, INC.<br>5 W 37TH STREET, 10TH FLOOR, NEW<br>YORK, NY 10010          | 14-1717344 |                           | 16,517               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (53) COLORADO SCHOOL OF MINES<br>1500 ILLINOIS STREET, GOLDEN, CO 80401                              | 84-6000551 | 115                       | 224,289              |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (54) COLUMBIA UNIVERSITY<br>615 W 131ST ST, NEW YORK, NY 10027                                       | 13-1624202 | 501(C)(3)                 | 392,684              |                               |   |                                       | SUPPORT OF RESEARCH ACTIVITIES                                 |
| (65) COMMUNITY ACTION PROJECT OF<br>TULSA COUNTY, INC.<br>4606 S GARNETT STE 100, TULSA, OK<br>74146 | 73-1019247 | 501(C)(3)                 | 89,047               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (56) CONSTRUCTION TECHNOLOGY<br>LABORATORIES, INC.<br>5400 OLD ORCHARD ROAD, SKOKIE, IL<br>60077     | 36-3478051 |                           | 23,586               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (57) CORNELL UNIVERSITY<br>222 DAY HALL, ITHACA, NY 14853  | 15-0532082 | 501(C)(3)                 | 677,256              |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (8) CORPORATION FOR THE<br>ADVANCEMENT OF POLICY EVALUATION<br>P.O. BOX 2393, PRINCETON, NJ 08543    | 52-1645606 |                           | 221,568              |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (sa) CRADLES TO CRAYONS<br>150 NORTH BEACON STREET, BRIGHTON,<br>MA 02135                            | 04-3584367 | 501(C)(3)                 | 896,881              |                               |   |                                       | CHARITABLE FUNDRAISING<br>CONDUCTED BY STUDENT<br>ORGANIZATION |
| (60) DANA-FARBER CANCER INSTITUTE<br>44 BINNEY ST, BOSTON, MA 02115                                  | 04-2263040 | 501(C)(3)                 | 34,346               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (61) DARTMOUTH COLLEGE<br>420 LEXINGTON AVE, NEW YORK, NY 10170                                      | 02-0222111 | 501(C)(3)                 | 7,110                |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (62) DENVER NEPHROLOGY<br>130 RAMPART WAY, SUITE 300B, DENVER,<br>CO 80230                           | 84-0591433 |                           | 32,563               |                               |   |                                       | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (63) DEPAUL UNIVERSITY<br>1 E JACKSON, CHICAGO, IL 60604   | 36-2167048 | 501(C)(3)                 | 212,086              |                               |   |                                       | SUPPORT OF RESEARCH ACTIVITIES                                 |
| (64) DIMENSION INX, LLC<br>303 E SUPERIOR ST., CHICAGO, IL 60611                                     | 81-3581892 |                           | 32,376               |                               |   |                                       | SUPPORT OF RESEARCH ACTIVITIES                                 |

| (a)  | (q)        | (c)                       | (P)                  | (e)                           | <b>(£)</b>   | (6)  | (h)  |
|--|------------|---------------------------|----------------------|-------------------------------|--|--|--|
| Name and address of organization or<br>government  | Z          | IRC section if applicable | Amount of cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal, other)  | Description of non-cash<br>assistance  | Purpose of grant or assistance                                 |
| (65) DREXEL UNIVERSITY<br>OFFICE OF RESEARCH, 3201 ARCH<br>STREET, SUITE 100, PHILADELPHIA, PA<br>19104                        | 23-1352630 | 501(C)(3)                 | 14,790               |                               |  | THE THE PROPERTY AND TH | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (66) DUKE UNIVERSITY<br>2200 WEST MAIN ST., ERWIN SQUARE,<br>SUITE 820, DURHAM, NC 27705                                       | 56-0532129 | 501(C)(3)                 | 1,353,712            |                               |  | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (67) EASTERN VIRGINIA MEDICAL SCHOOL<br>P.O. BOX 1980, NORFOLK, VA 23501   | 546055378  | 115                       | 313,305              |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (66) EMORY UNIVERSITY<br>201 DOWMAN DR, ATLANTA, GA 30322  | 58-0566256 | 501(C)(3)                 | 292,776              |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (69) ENGINEERING AND SOFTWARE SYSTEM SOLUTIONS, INC. 550 WEST C STREET, SUITE 1630, SAN DIEGO, CA 92101                        | 33-0976413 |                           | 44,325               |                               |  | THE COLUMN TWO IS NOT  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (70) ENLACE CHICAGO<br>2756 SOUTH HARDING AVE., CHICAGO, IL<br>60623   | 36-3727669 | 501(C)(3)                 | 15,230               |                               | THE PARTY OF THE P | TALL LIGHT TO THE PROPERTY OF  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (71) ERIE FAMILY HEALTH CENTER<br>1701 W SUPERIOR ST, CHICAGO, IL 60622  | 36-3088628 | 501(C)(3)                 | 1,341,346            |                               |  | ***************************************  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (72) EVANSTON COMMUNITY FOUNDATION<br>1560 SHERMAN AVENUE NO. 535,<br>EVANSTON, IL 60201                                       | 36-3466802 | 501(C)(3)                 | 104,875              |                               |  | TO THE PROPERTY OF THE PROPERT | CHARITABLE FUNDRAISING<br>CONDUCTED BY STUDENT<br>ORGANIZATION |
| (73) EVANSTON TOWNSHIP HIGH SCHOOL<br>DISTRICT 202<br>1600 DODGE AVENUE, EVANSTON, IL 60201                                    | 36-6004393 | 115                       | 16,031               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (74) EVANSTON/SKOKIE SCHOOL DISTRICT<br>65<br>1500 MCDANIEL AVENUE, EVANSTON, IL<br>60201                                      | 36-6007570 | 115                       | 47,384               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (75) EXECUTIVE FRAMEWORKS, LTD.<br>2705 W. AGATITE AVE, #1, CHICAGO, IL<br>60625   | 37-1450886 |                           | 82,631               |                               |  | TOTAL CALLACTURE   | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (76) EXPLORATORIUM<br>PIER 17, SUITE 100, SAN FRANCISCO, CA<br>94111-1456  | 94-1696494 | 501(C)(3)                 | 6,011                |                               |  | Table 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (77) FAIRVIEW HEALTH SERVICES<br>2450 RIVERSIDE AVENUE, MINNEAPOLIS,<br>MN 55454   | 41-0991680 | 501(C)(3)                 | 26,862               |                               | THE PROPERTY OF THE PROPERTY O | TOTAL PROPERTY OF THE PARTY OF  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (78) FAYETTEVILLE STATE UNIVERSITY<br>1200 MURCHISON RD, FAYETTEVILLE, NC<br>28301   | 56-1238736 | 501(C)(3)                 | 120,921              |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (79) FEINSTEIN INSTITUTE FOR MEDICAL<br>RESEARCH<br>350 COMMUNITY DR., MANHASSET, NY<br>11030                                  | 11-2673595 | 501(C)(3)                 | 32,192               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (80) FIRSTVITALS HEALTH AND WELLNESS<br>INC.<br>PO BOX 84526, DANVILLE, CA 94526   | 27-3446639 |                           | 13,325               |                               |  | Toronta in control of the control of | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (81) FLORIDA INTERNATIONAL UNIVERSITY<br>MODESTO A. MAIDIQUE CAMPUS, 11200<br>S.W. 8 STREET, MARC 430, MIAMI, FL<br>33199-0001 | 65-0177616 | 501(C)(3)                 | 84,486               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |

| (a)  | (q)        | (၁)                       | (p)                     | (e)                           | €   | (6)  | (f)                                |
|--|------------|---------------------------|-------------------------|-------------------------------|---|--|------------------------------------|
| Name and address of organization or<br>government  | Z<br>Z     | IRC section if applicable | Amount of<br>cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance     |
| (82) FLORIDA STATE UNIVERSITY<br>600 W COLLEGE AVE, TALLAHASSEE, FL<br>32306   | 59-1961248 | 115                       | 62,617                  |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (83) FORDHAM UNIVERSITY<br>441 E FORDHAM ROAD, BRONX, NY 10458   | 13-1740451 | 501(C)(3)                 | 62,102                  |                               |   | 100000   | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (84) FRED HUTCHINSON CANCER<br>RESEARCH CENTER<br>1100 FAIRVIEW AVE. N., P.O. BOX 19024,<br>SEATTLE. WA 98109        | 12-3715607 | 501(C)(3)                 | 273,799                 |                               |   | . Moreover   | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (85) FRIENDS OF THE ROBERT CROWN<br>CENTER<br>PO BOX 8064, EVANSTON, IL 60204  | 81-3741773 | 501(C)(3)                 | 333,333                 |                               |   | - Additional Annual Property of the Property o | SUPPORT OF COMMMUNITY ORGANIZATION |
| (86) GEISINGER CLINIC<br>100 NORTH ACADEMY AVENUE, DANVILLE,<br>PA 17822   | 23-1995911 | 501(C)(3)                 | 379,844                 |                               |   | ***************************************  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (87) GENEVA FOUNDATION<br>917 PACIFIC AVE, SUITE 600, TACOMA, WA<br>98402  | 91-1593913 | 501(C)(3)                 | 18,052                  |                               |   | A COMMISSION OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (88) GEORGE MASON UNIVERSITY<br>4400 UNIVERSITY DRIVE, MSN 4C6,<br>UNIVERSITY HALL, SUITE 3100, FAIRFAX,<br>VA 22030 | 54-0836354 | 501(C)(3)                 | 26,832                  |                               |   | Andrew Control of the | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (89) GEORGE WASHINGTON UNIVERSITY<br>2121 I ST NW, WASHINGTON, DC 20052  | 53-0196584 | 501(C)(3)                 | 199,554                 |                               |   | - LANGE AND AND AND AND AND AND AND AND AND AND  | SUPPORT OF RESEARCH ACTIVITIES     |
| (90) GEORGETOWN UNIVERSITY<br>37TH & O STREETS, NW, BOX 571168,<br>WASHINGTON, DC 20057-1168                         | 53-0196603 | 501(C)(3)                 | 17,598                  |                               |   | And the second s | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (91) GEORGIA INSTITUTE OF TECHNOLOGY 505 TENTH ST. ATLANTA, GA 30332   | 58-0603146 | 501(C)(3)                 | 97,394                  |                               |   | ***************************************  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (92) GEORGIA STATE UNIVERSITY<br>30 COURTLAND ST NE STE 217, ATLANTA,<br>GA 30303                                    | 58-1845423 | 501(C)(3)                 | 24,201                  |                               |   | A CONTRACTOR OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (93) GILDA'S CLUB<br>537 N. WELLS, CHICAGO, IL 60654   | 36-4115144 | 501(C)(3)                 | 10,000                  |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (94) GINGIBER LABS<br>901 S. CEDAR ST., PALATINE, I <u>L 60067-7176</u>  | 46-5472360 |                           | 113,765                 |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (95) H, LEE MOFFITT CANCER CENTER & RESEARCH INSTITUTE 12902 MAGNOLIA AVE, TAMPA, FL 33612                           | 59-2451713 | 501(C)(3)                 | 9,449                   |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (96) HARVARD UNIVERSITY<br>MASSACHUSETTS HALL, CAMBRIDGE, MA<br>02138  | 04-2103580 | 501(C)(3)                 | 634,272                 |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (97) HDT EXPEDITIONARY SYSTEMS, INC. 30500 AURORA ROAD, SOLON, OH 44139  | 54-1251757 |                           | 84,972                  |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (98) HEALTH OUEST MEDICAL PRACTICE, P.C.<br>45 READE PL., POUGHKEEPSIE, NY 12601                                     | 56-2669185 | 501(C)(3)                 | 12,425                  | ALLACATION                    |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (99) HEALTHPARTNERS INSTITUTE<br>3311 E. OLD SHAKOPEE RD.,<br>BLOOMINGTON, MN 55425-1361                             | 41-1670163 | 501(C)(3)                 | 161,630                 | WANTERPERS                    |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES  |

| (a)   | (q)        | (c)  | (p)                  | (e)  | (J)  | (6)  | (h)                               |
|---|------------|--|----------------------|--|--|--|-----------------------------------|
| Name and address of organization or<br>government   | Z<br>Ü     | IRC section if applicable  | Amount of cash grant | Amount of non-cash assistance  | Method of valuation (book, FMV)  | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| 100) HEKTOEN INSTITUTE FOR MEDICAL<br>RESEARCH<br>2240 W OGDEN AVE, CHICAGO, IL 60612   | 36-2244897 | 501(C)(3)  | 520,119              | -  | מונה (מונפון) מונפון   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (101) HELP AT HOME, LLC<br>1 N. STATE ST., SUITE 800, CHICAGO, IL<br>60602  | 36-2820808 |  | 000'9                |  | THE STATE OF THE S | THE COUNTY OF TH | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (102) HENRY M JACKSON FOUNDATION<br>FOR THE ADVANCEMENT OF MILITARY<br>MEDICINE<br>6720-A ROCKLEDGE DR, BETHESDA, MD<br>20817 | 52-1317896 | 501(C)(3)  | 24,374               | THE PROPERTY OF THE PROPERTY O |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (103) HOOSIER CANCER RESEARCH<br>NETWORK, INC.<br>500 N. MERIDIAN STREET, SUITE 100,<br>INDIANAPOLIS, IN 46204                | 26-0303542 | 501(C)(3)  | 000'6                |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (104) HORIZON RESEARCH, INC.<br>326 CLOISTER CT, CHAPEL HILL, NC 27514  | 56-1550276 |  | 12,670               |  |  |  | SUPPORT OF RESEARCH               |
| (105) HOWARD BROWN HEALTH CENTER<br>4025 N. SHERIDAN ROAD, CHICAGO, IL<br>60613   | 36-2894128 | 501(C)(3)  | 21,062               | 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (106) ICAHN SCHOOL OF MEDICINE AT<br>MOUNT SINAI<br>ONE GUSTAVE L. LEVY PLACE, BOX 1075,<br>NEW YORK, NY 10029                | 13-6171197 | 501(C)(3)  | 598,021              |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (107) ILLINOIS DEPARTMENT OF PUBLIC<br>HEALTH<br>535 WEST JEFFERSON STREET,<br>SPRINGFIELD, IL 62761                          | 01-0632628 | 115  | 73,155               |  |  | 100000000000000000000000000000000000000  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (109) ILLINOIS INSTITUTE OF TECHNOLOGY<br>3300 SOUTH FEDERAL STREET, CHICAGO,<br>IL 60616                                     | 36-2170136 | 501(C)(3)  | 75,996               |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (109) ILLINOIS PUBLIC HEALTH<br>ASSOCIATION<br>223 S 3RD ST., SPRINGFIELD, IL 62701   | 36-6108790 | 501(C)(3)  | 73,220               |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (10) ILLINOIS SCIENCE AND TECHNOLOGY<br>INSTITUTE<br>222 W. MERCHANDISE MART PLAZA,<br>CHICAGO, IL 60654                      | 45-4092094 | 501(C)(3)  | 23,917               |  |  | THE LABOR AND ADDRESS OF THE LABOR AND ADDRESS OF THE LABOR ADDRESS OF T | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (11) INDIANA HEMOPHILIA & THROMBOSIS<br>CENTER, INC.<br>8402 HARCOURT ROAD, INDIANAPOLIS, IN<br>46260                         | 35-2047838 |  | 20,841               |  |  | - The second sec | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (112) INDIANA UNIVERSITY<br>509 E. 3RD STREET, BLOOMINGTON, IN<br>47401   | 35-6001673 |  | 424,140              |  |  | 1000   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (113) INNOVATIONS FOR POVERTY ACTION<br>101 WHITNEY AVE, NEW HAVEN, CT 06510  | 06-1660068 | 1945 California (1945 C | 8,304                |  |  |  | SUPPORT OF RESEARCH               |
| (14) INSTITUTE FOR CANCER RESEARCH<br>(AKA FOX CHASE CANCER CENTER)<br>333 COTTMAN AVE., PHILADELPHIA, PA<br>19111-2434       | 23-6296135 | 501(C)(3)  | 170,909              |  |  | The state of the s | SUPPORT OF RESEARCH ACTIVITIES    |
|   |            |  |                      |  |  |  |                                   |
|   |            |  |                      |  |  |  |                                   |

| (a)   | (q)           | (0)                       | (p)                  | (e)                                 | <b>(</b>  | (6)  | (h)  |
|---|---------------|---------------------------|----------------------|-------------------------------------|---|--|--|
| Name and address of organization or<br>government   | <u>г</u><br>Ш | IRC section if applicable | Amount of cash grant | Amount of<br>non-cash<br>assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance                                 |
| (115) INSTITUTE FOR CLINICAL RESEARCH,<br>INC.<br>P.O. BOX 29545, WASHINGTON, DC 20017-<br>0745       | 52-1336656    | 501(C)(3)                 | 74,367               |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (116) IOWA STATE UNIVERSITY<br>3810 BEARDSHEAR HALL, AMES, IA 50011                                   | 42-6004224    | 115                       | 11,155               |                                     |   | ACADA AND AND AND AND AND AND AND AND AND  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (117) J. CRAIG VENTER INSTITUTE<br>9704 MEDICAL CENTER DR, ROCKVILLE,<br>MD 20850                     | 52-1842938    | 501(C)(3)                 | 59,385               |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (118) JACKSON LABORATORY<br>600 MAIN STREET, BAR HARBOR, ME 04609                                     | 01-0211513    | 501(C)(3)                 | 234,160              |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (119) JEWISH FEDERATION OF<br>METROPOLITAN CHICAGO<br>30 S WELLS, CHICAGO, IL 60606                   | 36-2167034    | 501(C)(3)                 | 619,613              |                                     |   |  | CHARITABLE FUNDRAISING<br>CONDUCTED BY STUDENT<br>ORGANIZATION |
| (120) JOHNS HOPKINS UNIVERSITY<br>CHARLES ST AND UNIVERSITY,<br>BALTIMORE, MD 21210                   | 52-0595110    | 501(C)(3)                 | 772,092              |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (121) JOSLIN DIABETES CENTER, INC.<br>ONE JOSLIN PLACE, BOSTON, MA 02215                              | 04-2203836    | 501(C)(3)                 | 129,693              |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (122) JUVENILE PROTECTIVE ASSOCIATION<br>1707 N HALSTED STREET, CHICAGO, IL<br>60614                  | 36-2167765    | 501(C)(3)                 | 25,000               |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (123) KAISER FOUNDATION RESEARCH<br>INSTITUTE<br>3800 N INTERSTATE AVE, PORTLAND, OR<br>97227         | 94-1105628    | 501(C)(3)                 | 81,864               |                                     |   | to an anti-  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (124) KENTUCKY REFUGEE MINISTRIES<br>969-B CHEROKEE ROAD, LOUISVILLE, KY<br>40204                     | 61-1229842    | 501(C)(3)                 | 50,000               |                                     |   | A TANAN AND AND AND AND AND AND AND AND AND  | SUPPORT OF COMMUNITY ORGANIZATION                              |
| (125) LES TURNER ALS FOUNDATION<br>5550 TOUHY AVENUE, SUITE 302, SKOKIE,<br>IL, 60077                 | 36-2916466    | 501(C)(3)                 | 5,500                |                                     |   | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (128) LOUIS STOKES CLEVELAND VA<br>MEDICAL CENTER<br>10701 EAST BOULEVARD, CLEVELAND, OH<br>44106     | 34-1710663    | 501(C)(3)                 | 81,560               |                                     |   | The second secon | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (127) LOYOLA UNIVERSITY CHICAGO<br>1032 W SHERIDAN RD, CHICAGO, IL 60660                              | 36-1408475    | 501(C)(3)                 | 34,361               |                                     |   | - All Andrews and  | SUPPORT OF RESEARCH ACTIVITIES                                 |
| (128) LYNN SAGE CANCER RESEARCH<br>FOUNDATION<br>541 NORTH FAIRBANKS COURT, 800,<br>CHICAGO, IL 60611 | 36-3727715    | 501(C)(3)                 | 10,000               |                                     |   | and a decided a minimize   | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (129) LYRIC OPERA OF CHICAGO<br>20 N WACKER DRIVE, CHICAGO, IL 60606                                  | 36-6008929    | 501(C)(3)                 | 7,500                | and desirence of the second         |   |  | SUPPORT OF RESEARCH ACTIVITIES                                 |
| (130) MARKETLAB RESEARCH, INC.<br>100 PENN SQUARE EAST, SUITE 1200,<br>PHILADELPHIA, PA 19107         | 23-2502559    |                           | 1,254,373            |                                     |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (131) MASSACHUSETTS GENERAL<br>HOSPITAL<br>55 FRUIT ST, BOSTON, MA 02114                              | 04-1564655    | 501(C)(3)                 | 481,911              | AAAA AAA MARKA AAAA                 |   | A SHA A A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A SHA A  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |

| (a)   | (q)        | (2)                       | (p)                  | (e)                                 | (J)  | (6)   | (h)                               |
|---|------------|---------------------------|----------------------|-------------------------------------|--|---|-----------------------------------|
| Name and address of organization or<br>government   | Z          | IRC section if applicable | Amount of cash grant | Amount of<br>non-cash<br>assistance | Method of valuation (book, FWV,  | Description of non-cash<br>assistance   | Purpose of grant or assistance    |
| (132) MASSACHUSETTS INSTITUTE OF<br>TECHNOLOGY<br>77 MASSACHUSETTS AVE, CAMBRIDGE,<br>MA 02142                    | 04-2103594 | 501(C)(3)                 | 91,563               |                                     |  | 1117-117-1117-1117-1117-1117-1117-1117-1117-1117-1117-1117-1117-1117-11 | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (133) MAYO CLINIC ARIZONA<br>13400 EAST SHEA BLVD., SCOTTSDALE, AZ<br>85259                                       | 86-0800150 | 501(C)(3)                 | 388,573              |                                     |  | manufacture and the second sec  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (134) MAYO CLINIC JACKSONVILLE<br>4500 SAN PABLO RD, JACKSONVILLE, FL<br>32224                                    | 59-3337028 | 501(C)(3)                 | 215,685              |                                     | ***************************************  | The state of the s  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (135) MAYO CLINIC ROCHESTER<br>200 FIRST ST, SW, ROCHESTER, MN 55905  | 41-6011702 | 501(C)(3)                 | 222,365              |                                     |  | The state of the s  | SUPPORT OF RESEARCH               |
| (136) MEDICAL COLLEGE OF WISCONSIN<br>8701 WATERTOWN PLANK RD,<br>MILWAUKEE, WI 53226                             | 39-0806261 | 501(C)(3)                 | 335,678              |                                     | THE PLANT OF THE P | TANKA AMAD  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (137) MEDICAL RESEARCH ANALYTICS AND INFORMATICS ALLIANCE 20 NORTH WACKER DRIVE, C/O TECHNEXUS, CHICAGO, IL 60606 | 45-3007467 |                           | 244,544              |                                     |  | With the state of   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (138) MEDICAL UNIVERSITY OF SOUTH<br>CAROLINA<br>179 ASHLEY AVE, CHARLESTON, SC 29425                             | 57-6000722 | 115                       | 106,716              |                                     |  | 7.000   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (139) MEMORIAL HOSPITAL OF RHODE<br>ISLAND<br>111 BREWSTER ST, PAWTUCKET, RI 02680                                | 05-0259004 | 501(C)(3)                 | 30,841               |                                     |  |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (140) MEMORIAL SLOAN-KETTERING<br>CANCER CENTER<br>1275 YORK AVE, NEW YORK, NY 10065                              | 13-1624182 | 501(C)(3)                 | 183,888              |                                     |  | 100000000000000000000000000000000000000   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (141) MERCY HOSPITAL & MEDICAL<br>CENTER<br>2525 S MICHIGAN AVE, CHICAGO, IL 60616                                | 36-2170152 | 501(C)(3)                 | 141,296              |                                     |  | 119.0   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (142) METASTAR, INC.<br>2909 LANDMARK PLACE, MADISON, WI<br>53713   | 39-1332612 | 501(C)(3)                 | 234,534              |                                     |  |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (143) METHODIST HOSPITAL<br>6670 BERTNER STREET, HOUSTON, TX<br>77030   | 87-0721923 | 501(C)(3)                 | 34,688               |                                     |  | TOTAL ALADERS AND AND AND AND AND AND AND AND AND AND   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (144) METROPOLITAN ASIAN FAMILY<br>SERVICES<br>505 N. ROSELLE, ROSELLE, IL 60172-1013                             | 36-3925432 |                           | 20,165               |                                     |  |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (145) MICHIGAN STATE UNIVERSITY<br>113 ANGELL BLDG, EAST LANSING, MI<br>48824                                     | 38-6005984 | 115                       | 98,095               |                                     |  |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (146) MIDWESTERN UNIVERSITY<br>555 31ST ST, DOWNERS GROVE, IL 60515   | 36-3377698 | 501(C)(3)                 | 8,508                |                                     |  | TOTAL   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (147) MILLENNIUM PARK FOUNDATION<br>201 EAST RANDOLPH, CHICAGO, IL 60601  | 36-4244167 | 501(C)(3)                 | 10,000               |                                     |  | 11777 LAVANA  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (148) MIND RESEARCH NETWORK<br>1101 YALE BLVD, NE, ALBUQUERQUE, NM<br>87106                                       | 85-0457562 | 501(C)(3)                 | 60,027               |                                     |  |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   |            |                           |                      |                                     |  |   |                                   |
|   |            |                           |                      |                                     |  |   |                                   |

| (a)   | (p)        | (၁)                       | (p)                  | (a)                           | (£)   | (B)  | (F)                               |
|---|------------|---------------------------|----------------------|-------------------------------|---|--|-----------------------------------|
| Name and address of organization or<br>government   | Z<br>Ü     | IRC section if applicable | Amount of cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (149) MISSOURI UNIVERSITY OF SCIENCE AND TECHNOLOGY 300 W 12TH ST, 202 CENTENNIAL HALL, ROLLA, MO 65401 | 43-6003859 | 115                       | 26,872               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   | 47-0944526 |                           | 51,951               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| U OF ECONOMIC<br>3 AVE., CAMBRIDGE,   | 13-1641075 | 501(C)(3)                 | 22,395               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   | 74-2044647 | 501(C)(3)                 | 64,283               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| 30  | 98-1107218 |                           | 354,762              |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   | 22-6000910 | 115                       | 35,624               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| NE)   | 13-5562308 | 501(C)(3)                 | 222,204              |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (155) NORTH CAROLINA STATE UNIVERSITY 50<br>2711 FOUNDERS DR. RALEIGH, NC 27695                         | 56-6000756 | 115                       | 32,299               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   | 36-6086819 | 501(C)(3)                 | 557,539              |                               |   | 1 LAND AND THE PROPERTY OF THE | SUPPORT OF RESEARCH ACTIVITIES    |
| (158) NORTHSHORE UNIVERSITY<br>HEALTHSYSTEM RESEARCH INSTITUTE<br>3650 RIDGE AVE, EVANSTON, IL 60201    | 36-4191793 | 501(C)(3)                 | 1,127,357            |                               | =   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| <b>≻</b>  | 36~3097297 | 501(C)(3)                 | 856,000              |                               |   | - Academic A | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   | 37-0960170 | 501(C)(3)                 | 13,827               |                               | Average   | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (161) NORTHWESTERN UNIVERSITY<br>SETTLEMENT HOUSE<br>1400 WEST AUGUSTA BLVD, CHICAGO, IL<br>60642       | 36-2167818 | 501(C)(3)                 | 25,000               |                               |   | and the state of t | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (162) OBJECTIVE ARTS, INC.<br>20 N. WACKER DRIVE, CHICAGO, IL 60606 7                                   | 75-2975237 |                           | 126,720              |                               |   | - Address - Addr | SUPPORT OF RESEARCH<br>ACTIVITIES |
| ∀   | 72-0502505 | 501(C)(3)                 | 61,480               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   | 31-6025986 | 115                       | 111,241              |                               |   | AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA  | SUPPORT OF RESEARCH ACTIVITIES    |
| (165) OKLAHOMA STATE UNIVERSITY<br>113 STUDENT UNION, STILLWATER, OK<br>74078                           | 73-1383996 | 115                       | 283,898              |                               |   | **************************************   | SUPPORT OF RESEARCH<br>ACTIVITIES |

| (a)   | (q)        | (0)  | (p)                  | (e)  | (±)  | (6)  | (h)                               |
|---|------------|--|----------------------|--|--|--|-----------------------------------|
| Name and address of organization or<br>government   | Z<br>Ш     | IRC section if applicable  | Amount of cash grant | Amount of<br>non-cash<br>assistance  | Method of valuation (book, FMV,  | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (186) OPTONET, INC.<br>828 DAVIS STREET, SUITE 206, EVANSTON,<br>IL 60201   | 74-3092128 |  | 42,968               |  | (also includes   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (167) OREGON HEALTH & SCIENCE<br>UNIVERSITY<br>3181 SOUTHWEST SAM JACKSON PARK<br>RD, PORTLAND, OR 97239                        | 93-1176109 | 115  | 197,330              | 7  |  | TOTAL AND AND AND AND AND AND AND AND AND AND  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (168) OREGON STATE UNIVERSITY<br>OFFICE OF SPONSORED PROGRAMS, 312<br>KERR ADMINISTRATION BUILDING,<br>CORVALLIS, OR 97331-2140 | 48-1278540 | 501(C)(3)  | 92,892               |  | THE PROPERTY OF THE PROPERTY O | THE LAND OF  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (169) OSF SAINT FRANCIS MEDICAL<br>CENTER<br>530 NE GLEN OAK AVENUE, PEORIA, IL<br>61637  | 37-0813229 | 501(C)(3)  | 48,924               | T TOTAL CONTRACTOR OF THE PARTY | 77777  | THE COLUMN TWO COLUMN  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (170) PACIFIC HEALTH RESEARCH AND EDUCATION INSTITUTE 3375 KOAPAKA ST, STE I-540, HONOLULU, HI 98819                            | 99-0303308 | 501(C)(3)  | 7,560                |  |  | 1000   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (171) PALO ALTO UNIVERSITY<br>1791 ARASTRADERO ROAD, PALO ALTO,<br>CA 94304   | 94-2340692 | 501(C)(3)  | 15,180               |  |  | TO THE STATE OF TH | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (172) PARK STREET SOLUTIONS COMPANY<br>ONE ENERGY CENTER, 40 SHUMAN BLVD.,<br>SUITE 295, NAPERVILLE, IL 60563                   | 20-1152430 | To the state of th | 46,675               |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (173) PENNSYLVANIA STATE UNIVERSITY<br>308 OLD MAIN, UNIVERSITY PARK, PA<br>16802   | 24-6000376 | 115  | 279,826              |  |  | TOTAL A A MARIA  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (174) PORTLAND VA RESEARCH<br>FOUNDATION, INC.<br>P.O. BOX 69539, PORTLAND, OR 97239  | 94-3090170 | 501(C)(3)  | 41,123               |  |  | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (173) PRESENCE HEALTH NETWORK<br>200 S. WACKER DR., 11TH FLOOR,<br>CHICAGO, IL 60606  | 36-1649520 | 501(C)(3)  | 52,401               |  |  | The second secon | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (176) PRIMODAL US INCORPORATED<br>305 BURROWS RD., KALAMAZOO, MI 49006  | 26-0701716 |  | 7,250                |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (177) PRINCETON UNIVERSITY<br>P.O. BOX 36, ORPA, 4 NEW SOUTH<br>BUILDING, PRINCETON, NJ 08544                                   | 21-0634501 | 501(C)(3)  | 47,045               |  |  | 777  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (178) PRODUCT DEVELOPMENT & ANALYSIS, LLC 1776 LEGACY CIRCLE, SUITE 115, NAPERVILLE, IL 60563                                   | 36-4121041 |  | 20,600               |  |  | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (179) PROSTHETIC DESIGN, INC.<br>700 HARCO DRIVE, CLAYTON, OH 45315   | 31-1341713 | THE TRANSPORTER OF THE TRANSPORT | 30,706               | THE PROPERTY OF THE PROPERTY O |  | ,  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (180) PURDUE UNIVERSITY<br>610 PURDUE MALL, WEST LAFAYETTE, IN<br>47906   | 35-6002041 | 115  | 593,277              |  |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (181) QUESTEK INNOVATIONS LLC<br>1820 RIDGE AVENUE, EVANSTON, IL 60201  | 36-4116425 |  | 272,885              |  | THE STATE OF THE S | THE LABORATOR OF THE PROPERTY  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (182) RANCHO RESEARCH INSTITUTE<br>P.O. BOX 3500, DOWNEY, CA 90242  | 95-1911180 | 501(C)(3)  | 22,994               |  |  | 1  | SUPPORT OF RESEARCH<br>ACTIVITIES |
|   |            |  |                      |  |  |  |                                   |

| (a)   | ( <b>a</b> ) | (၁)                       | (p)                  | (a)  | Œ)  | (b)  | (h)                               |
|---|--------------|---------------------------|----------------------|--|---|--|-----------------------------------|
| Name and address of organization or<br>government   | N<br>EN      | IRC section if applicable | Amount of cash grant | Amount of<br>non-cash<br>assistance  | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (183) RAVINIA FESTIVAL ASSOCIATION<br>418 SHERIDAN ROAD, HIGHLAND PARK, IL<br>60035                               | 36-6002273   | 501(C)(3)                 | 14,000               |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (184) REHABILITATION INSTITUTE OF<br>CHICAGO<br>345 E SUPERIOR ST, CHICAGO, IL 60611                              | 36-2256036   | 501(C)(3)                 | 699,518              |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (185) RESEARCH FOUNDATION FOR<br>MENTAL HYGIENE, INC.<br>150 BROADWAY, SUITE 301, MENANDS, NY<br>12204            | 14-1410842   | 501(C)(3)                 | 8,745                |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (186) RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK 65-30 KISSENA BLVD, QUEENS, NY 11367                 | 13-1988190   | 501(C)(3)                 | 380,157              | Adecised Adecise and the second and  |   | ***************************************  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (187) RESEARCH TRIANGLE INSTITUTE<br>12 DAVIS DR, RESEARCH TRIANGLE PARK,<br>NC 27709                             | 56-0686338   | 501(C)(3)                 | 110,422              | ***************************************  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (188) RHO FEDERAL SYSTEMS DIVISION,<br>INC.<br>6330 QUADRANGLE DR, CHAPEL HILL, NC<br>27517                       | 56-1927659   |                           | 9,440                |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (189) RICE UNIVERSITY<br>6100 MAIN ST, HOUSTON, TX 77005  | 74-1109620   | 501(C)(3)                 | 58,858               |  |   |  | SUPPORT OF RESEARCH ACTIVITIES    |
| (190) ROCKY MOUNTAIN MOVEMENT<br>DISORDERS CENTER, P.C.<br>701 E. HAMPDEN AVE., SUITE 510,<br>ENGLEWOOD, CO 80113 | 26-0756771   |                           | 16,570               | A A A A A A A A A A A A A A A A A A A  |   | A CONTRACTOR OF THE CONTRACTOR | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (191) ROSALIND FRANKLIN UNIVERSITY OF MEDICINE & SCIENCE 3333 GREEN BAY ROAD, NORTH CHICAGO, IL 60064-3037        | 36-2181973   | 501(C)(3)                 | 7,877                |  |   | ***************************************  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (182) RUSH UNIVERSITY MEDICAL CENTER<br>1653 W CONGRESS PARKWAY, CHICAGO,<br>IL 60612                             | 36-2174823   | 501(C)(3)                 | 1,594,031            | ***************************************  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (14%) RUTGERS UNIVERSITY<br>57 US HIGHWAY 1, NEW BRUNSWICK, NJ<br>08901   | 22-6001086   | 501(C)(3)                 | 23,612               |  |   | A DESIGNATION OF THE PROPERTY  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (194) SAINT LUKE'S HOSPITAL (KANSAS<br>CITY, MO)<br>4401 WORNALL ROAD, KANSAS CITY, MO<br>64111                   | 44-0545297   | 501(C)(3)                 | 34,832               | And and the state of the state  |   | A A A A A A A A A A A A A A A A A A A  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (185) SANFORD BURNHAM PREBYS<br>MEDICAL DISCOVERY INSTITUTE<br>10901 N TORREY PINES RD, LA JOLLA, CA<br>92037     | 51-0197108   | 501(C)(3)                 | 304,111              | A CONTRACTOR OF THE CONTRACTOR | ***************************************           | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (196) SCHECK & SIRESS PROSTHETICS,<br>INC.<br>1S376 SUMMIT AVENUE, COURT E,<br>OAKBROOK TERRACE, IL 60181         | 36-3217435   |                           | 63,872               |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (197) SCHNEIDER ELECTRIC ENGINEERING<br>SERVICES, LLC<br>1415 S. ROSELLE RD., PALATINE, IL 60067-<br>7337         | 36-2440683   |                           | 5,575                | ALALA MARKATAN PARAMATAN P |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |

| (a)   | ( <b>q</b> ) | (၁)                       | (p)                  | (e)                           | <b>(</b>   | (6)  | (h)  |
|---|--------------|---------------------------|----------------------|-------------------------------|--|--|--|
| Name and address of organization or<br>government   | Z<br>W       | IRC section if applicable | Amount of cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal other)   | Description of non-cash assistance   | Purpose of grant or assistance                                 |
| (188) SCRIPPS RESEARCH INSTITUTE<br>10550 N TORREY PINES RD, LA JOLLA, CA<br>92037                  | 33-0435954   | 501(C)(3)                 | 551,089              |                               | The second secon | T THE TOTAL AND  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (199) SEATTLE CHILDREN'S RESEARCH<br>INSTITUTE<br>1904 9TH AVE, SEATTLE, WA 98105                   | 91-1156519   | 501(C)(3)                 | 15,539               |                               |  | Transferration of the state of  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (200) SENTARA HEALTHCARE<br>6015 POPLAR HALL DR, NORFOLK, VA<br>23502                               | 52-1271901   | 501(C)(3)                 | 21,465               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (201) SIEMENS CORPORATION<br>300 NEW JERSEY AVENUE, SUITE 1000,<br>WASHINGTON, DC 20001             | 13-2623358   |                           | 224,892              | -                             | · remarkantak  | TOTAL LANG.  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (202) SOCIALWORKS<br>12100 WILSHIRE BLVD, 705, LOS ANGELES,<br>CA 90025                             | 81-3662609   | 501(C)(3)                 | 5,809                |                               |  |  | CHARITABLE FUNDRAISING<br>CONDUCTED BY STUDENT<br>ORGANIZATION |
| (203) SRI INTERNATIONAL<br>333 RAVENSWOOD AVE., MENLO PARK, CA<br>94025                             | 94-1160950   |                           | 13,034               |                               | THE PROPERTY OF THE PROPERTY O |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (204) ST. VINCENT MEDICAL GROUP, INC. 8333 NAAB RD., INDIANAPOLIS, IN 46260-1992                    | 27-2039417   |                           | 12,137               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (205) STANFORD UNIVERSITY<br>295 GALVEZ ST, STANFORD, CA 94305                                      | 94-1156365   | 501(C)(3)                 | 437,114              |                               |  | THE THE PARTY OF T | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (206) START SMALL THINK BIG<br>8 W 126TH STREET, NEW YORK, NY 10027                                 | 27-1821066   | 501(C)(3)                 | 53,151               |                               |  |  | SUPPORT OF COMMUNITY ORGANIZATION                              |
| (207) SYRACUSE UNIVERSITY<br>113 BOWNE HALL, SYRACUSE, NY 13244                                     | 15-0532081   | 501(C)(3)                 | 89,160               |                               | 1  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (208) TELLIGEN, INC.<br>1776 WEST LAKES PKWY, WEST DES<br>MOINES, IA 50266                          | 42-0992483   |                           | 291,133              |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (209) TEMPLE UNIVERSITY<br>1801 N BROAD STREET, PHILADELPHIA, PA<br>19122                           | 23-1365971   | 501(C)(3)                 | 332,666              |                               | T T T T T T T T T T T T T T T T T T T  | **************************************   | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (210) TEXAS TECH UNIVERSITY<br>2500 BROADWAY, LUBBOCK, TX 79409                                     | 75-6002622   | 501(C)(3)                 | 133,458              |                               |  | Tanan managaria  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (211) THE ART INSTITUTE OF CHICAGO<br>111 S MICHIGAN AVE, CHICAGO, IL 60603                         | 36-2167725   | 501(C)(3)                 | 10,000               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (212) TIDEMARK INSTITUTE<br>73 BRISTOL ROAD, DAMARISCOTTA, ME<br>04543                              | 45-5139751   | 501(C)(3)                 | 42,560               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (213) TUFTS MEDICAL CENTER<br>800 WASHINGTON STREET, BOSTON, MA<br>02111                            | 27-0440772   | 501(C)(3)                 | 38,613               |                               |  | THE LOCATION OF THE PARTY OF TH | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (214) TUFTS UNIVERSITY<br>OFFICE OF RESEARCH ADMINISTRATION,<br>136 HARRISON AVE., BOSTON, MA 02165 | 04-2103634   | 501(C)(3)                 | 35,715               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (215) TULANE UNIVERSITY<br>6823 ST CHARLES AVE, NEW ORLEANS, LA<br>70118                            | 72-0423889   | 501(C)(3)                 | 888,113              |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |
| (216) UCHICAGO ARGONNE, LLC, ARGONNE<br>NATIONAL LABORATORY<br>9700 S. CASS AVE, LEMONT, IL 60439   | 68-0628477   | 115                       | 998'69               |                               |  |  | SUPPORT OF RESEARCH<br>ACTIVITIES                              |

| (a)  | (q)         | (2)                       | (p)                  | (e)                                 | <b>(£)</b>  | (B)   | (h)                               |
|--|-------------|---------------------------|----------------------|-------------------------------------|---|---|-----------------------------------|
| Name and address of organization or<br>government  | Z<br>Z      | IRC section if applicable | Amount of cash grant | Amount of<br>non-cash<br>assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance   | Purpose of grant or assistance    |
| (217) UNITED STATES DRUG TESTING<br>LABORATORIES, INC.<br>1700 S. MOUNT PROSPECT RD., DES<br>PLAINES, IL 60018     | 42-1612910  |                           | 242,989              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (218) UNITED WAY OF METROPOLITAN<br>CHICAGO<br>333 SOUTH WABASH AVENUE, CHICAGO, IL<br>60604                       | 30-0200478  | 501(C)(3)                 | 15,000               |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (219) UNIVERSIDAD POPULAR<br>2801 S. HAMLIN AVE., CHICAGO, IL 60623  | 36-3028729  | 501(C)(3)                 | 13,277               |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (220) UNIVERSITY OF ALABAMA AT<br>BIRMINGHAM<br>1530 3RD AVE SOUTH, BIRMINGHAM, AL<br>35294                        | 63-6005396  | 115                       | 550,318              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (221) UNIVERSITY OF ARIZONA<br>617 N SANTA RITA AVE, TUCSON, AZ 85721  | 74-2652689  | 115                       | 87,764               |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (222) UNIVERSITY OF CALIFORNIA,<br>BERKELEY<br>200 CALIFORNIA HALL, BERKELEY, CA<br>94720                          | 94-6002123  | 115                       | 162,465              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (223) UNIVERSITY OF CALIFORNIA, DAVIS<br>ONE SHIELDS AVE, DAVIS, CA 95616  | 94-6036494  | 115                       | 182,076              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (224) UNIVERSITY OF CALIFORNIA, IRVINE OFFICE OF ADMINISTRATION, 5171 CALIFORNIA AVE., SUITE 150, IRVINE, CA 92697 | 95-2226406  | 115                       | 128,295              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (225) UNIVERSITY OF CALIFORNIA, LOS<br>ANGELES<br>11000 KINROSS AVE., SUITE 211, LOS<br>ANGELES, CA 90095          | 95-6006143  | 115                       | 143,309              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (226) UNIVERSITY OF CALIFORNIA, SAN<br>DIEGO<br>9500 GILMAN DR, LA JOLLA, CA 92093                                 | 95-6006144  | 115                       | 445,615              |                                     |   | de La Company version de la Company version | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (227) UNIVERSITY OF CALIFORNIA, SAN<br>FRANCISCO<br>505 PARNASSUS AVE, SAN FRANCISCO,<br>CA 94143                  | 56-6001393  | 115                       | 841,936              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (228) UNIVERSITY OF CALIFORNIA, SANTA<br>CRUZ<br>OFFICE OF SPONSORED PROJECTS,<br>SANTA CRUZ, CA 95064-1077        | 94-1539563  | 115                       | 16,564               |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (229) UNIVERSITY OF CENTRAL FLORIDA<br>12201 RESEARCH PARKWAY, SUITE 501,<br>ORLANDO, FL 32826-3246                | 59-292-4021 | 501(C)(3)                 | 92,936               |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (230) UNIVERSITY OF CHICAGO<br>5801 S ELLIS AVE, CHICAGO, IL 60637   | 36-2177139  | 501(C)(3)                 | 8,111,344            |                                     |   | 99999   | SUPPORT OF RESEARCH ACTIVITIES    |
| (231) UNIVERSITY OF CHICAGO, NATIONAL<br>OPINION RESEARCH CENTER<br>1155 EAST 60TH STREET, CHICAGO, IL<br>60637    | 36-2167808  | 501(C)(3)                 | 314,127              |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (232) UNIVERSITY OF CINCINNATI<br>2600 CLIFTON AVE, CINCINNATI, OH 45221   | 31-6000989  | 115                       | 80,416               |                                     |   |   | SUPPORT OF RESEARCH<br>ACTIVITIES |

| (a)   | (q)        | (၁)                       | (p)                  | (e)                                     | <b>(£)</b>  | (b)  | (h)                               |
|---|------------|---------------------------|----------------------|---|---|--|-----------------------------------|
| Name and address of organization or<br>government   | Z<br>iii   | IRC section if applicable | Amount of cash grant | Amount of<br>non-cash<br>assistance     | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (233) UNIVERSITY OF COLORADO<br>13001 EAST 17TH PLACE, BLDG 500, ROOM<br>W1126, AURORA, CO 80045                              | 84-6000555 | 501(C)(3)                 | 903,156              |   |   | **************************************   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (234) UNIVERSITY OF CONNECTICUT<br>HEALTH CENTER<br>263 FARMINGTON AVE, FARMINGTON, CT<br>06030                               | 36-6009515 | 115                       | 103,889              | 111111111111111111111111111111111111111 |   | THE PROJECT OF THE PR | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (235) UNIVERSITY OF DELAWARE<br>HULLIHEN HALL 175 S COLLEGE AV,<br>NEWARK, DE 19716   | 51-6000297 | 501(C)(3)                 | 110,293              |   |   | T T T T T T T T T T T T T T T T T T T  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (236) UNIVERSITY OF FLORIDA<br>201 CRISER HALL, GAINESVILLE, FL 32611   | 59-6002052 | 115                       | 425,265              |   |   | Triple Control | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (237) UNIVERSITY OF IDAHO<br>875 PERMIMETER DR., MOSCOW, ID 83844-<br>3020  | 82-6000945 | 115                       | 65,349               |   |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (238) UNIVERSITY OF ILLINOIS AT CHICAGO<br>809 S. MARSHFIELD AVENUE, MB 502, M/C<br>551, CHICAGO, IL 60612-4305               | 37-6000511 | 115                       | 5,330,377            |   |   | THEFT  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (239) UNIVERSITY OF ILLINOIS AT URBANA-<br>CHAMPAIGN<br>601 E JOHN ST, CHAMPAIGN, IL 61820                                    | 37-6000511 | 115                       | 955,425              |   |   | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (240) UNIVERSITY OF IOWA<br>100 MOSSMAN BUSINESS SVCS BLDG,<br>IOWA CITY, IA 52245  | 42-6004813 | 110                       | 256,708              |   |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (241) UNIVERSITY OF KANSAS MEDICAL<br>CENTER RESEARCH INSTITUTE<br>3901 RAINBOW BOULEVARD, MSN 1039,<br>KANSAS CITY, KS 66160 | 48-1108830 | 501(C)(3)                 | 87,412               |   |   | THE TAXABLE PROPERTY.  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (242) UNIVERSITY OF KENTUCKY<br>100 FUNKHOUSER BLDG, LEXINGTON, KY<br>40506   | 61-6001218 | 172                       | 156,071              |   |   | The second secon | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (243) UNIVERSITY OF LOUISIANA AT<br>LAFAYETTE<br>104 UNIVERSITY CIRCLE, LAFAYETTE, LA<br>70503                                | 72-6000820 | 115                       | 194,721              |   |   | TO THE PARTY OF TH | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (244) UNIVERSITY OF MARYLAND<br>2108 MITCHELL BLDG, COLLEGE PARK, MD<br>20742   | 52-6002033 | 115                       | 197,351              |   |   | AND THE PROPERTY OF THE PROPER | SUPPORT OF RESEARCH ACTIVITIES    |
| (245) UNIVERSITY OF MASSACHUSETTS<br>AMHERST<br>70 BUTTERFIELD TERRACE, AMHERST, MA<br>01003                                  | 04-3167352 | 11                        | 93,021               |   |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (246) UNIVERSITY OF MIAMI<br>1252 MEMORIAL DR, CORAL GABLES, FL<br>33146  | 59-0624458 | 501(C)(3)                 | 401,404              |   |   | 1177, 1188   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (247) UNIVERSITY OF MICHIGAN<br>515 E JEFFERSON, ANN ARBOR, MI 48109  | 38-6000134 | 115                       | 958,984              |   |   | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (248) UNIVERSITY OF MINNESOTA<br>101 PLEASANT ST, MINNEAPOLIS, MN<br>55455  | 41-6007513 | 115                       | 384,833              |   |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (249) UNIVERSITY OF MISSOURI-COLUMBIA<br>310 JESSE HALL, COLUMBIA, MO 65211-<br>1230  | 43-6003859 | 115                       | 33,246               |   |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |

| (a)  | (q)        | (၁)                       | (p)                  | (e)  | (J)   | (6)  | (h)                               |
|--|------------|---------------------------|----------------------|--|---|--|-----------------------------------|
| Name and address of organization or government   | 2          | IRC section if applicable | Amount of cash grant | Amount of non-cash assistance  | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (250) UNIVERSITY OF NEBRASKA MEDICAL<br>CENTER<br>987835 NEBRASKA MEDICAL CENTER,<br>OMAHA, NE 68198         | 47-0491233 | 115                       | 14,187               |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (251) UNIVERSITY OF NEBRASKA-LINCOLN 3835 HOLDREGE ST., LINCOLN, NE 68583                                    | 47-0049123 | 115                       | 48,041               |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (252) UNIVERSITY OF NEVADA, LAS VEGAS<br>OFFICE OF SPONSORED PROGRAMS, LAS<br>VEGAS, NV 89154-1055           | 88-6000024 | 115                       | 25,035               |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (263) UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 9201 UNIVERSITY CITY BLVD, CHARLOTTE, NC 28223             | 56-6000642 | 113                       | 862,623              |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (254) UNIVERSITY OF NOTRE DAME<br>317 MAIN BUILDING, NOTRE DAME, IN<br>46556                                 | 35-0868188 | 501(C)(3)                 | 7,846                |  |   |  | SUPPORT OF RESEARCH ACTIVITIES    |
| (255) UNIVERSITY OF PENNSYLVANIA<br>3451 WALNUT ST, PHILADELPHIA, PA 19104                                   | 23-1352685 | 501(C)(3)                 | 514,145              | 444  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (256) UNIVERSITY OF PITTSBURGH<br>4227 FIFTH AVE, PITTSBURGH, PA 15260                                       | 25-0965591 | 501(C)(3)                 | 627,411              | Andrew or .  |   |  | SUPPORT OF RESEARCH ACTIVITIES    |
| (267) UNIVERSITY OF PUERTO RICO<br>MEDICAL SCIENCES CAMPUS<br>P. O. BOX 365067, SAN JUAN, PR 00936-<br>5067  | 66-0433760 |                           | 100,732              |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (258) UNIVERSITY OF ROCHESTER<br>518 HYLAN BUILDING, ROCHESTER, NY<br>14627                                  | 16-0743209 | 501(C)(3)                 | 982,340              |  |   | en en en en en en en en en en en en en e   | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (259) UNIVERSITY OF SOUTH CAROLINA<br>1600 HAMPTON STREET, ROOM 612,<br>COLUMBIA, SC 29208                   | 57-6001153 | 501(C)(3)                 | 7,565                |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (260) UNIVERSITY OF SOUTH FLORIDA -<br>TAMPA<br>4202 E. FOWLER AVE, TAMPA, FL 33620                          | 59-3102112 | 115                       | 32,403               |  |   | THE PROPERTY OF THE PROPERTY O | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (261) UNIVERSITY OF SOUTHERN<br>CALIFORNIA<br>1540 ALCAZAR ST, LOS ANGELES, CA<br>90089                      | 95-1642394 | 501(C)(3)                 | 634,241              |  |   | TO A TO A TO A TO A TO A TO A TO A TO A  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (262) UNIVERSITY OF TEXAS AT AUSTIN<br>2100 SAN JACINTO BLVD, AUSTIN, TX<br>78712                            | 74-6000203 | 115                       | 501,491              |  |   | and the second s | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (263) UNIVERSITY OF TEXAS AT SAN<br>ANTONIO<br>ONE UTSA CIRCLE, SAN ANTONIO, TX<br>78249                     | 74-1717115 | 115                       | 40,228               | 44444111111111111111111111111111111111   | di Arri   | and the second s | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (264) UNIVERSITY OF TEXAS HEALTH<br>SCIENCE CENTER AT HOUSTON<br>7000 FANNIN, UCT 1006, HOUSTON, TX<br>77030 | 74-1761309 | 115                       | 23,537               | Additional and the second seco |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (265) UNIVERSITY OF TEXAS M. D.<br>ANDERSON CANCER CENTER<br>1515 HOLCOMBE BLVD, HOUSTON, TX<br>77030        | 76-0273984 | 115                       | 12,077               |  |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |

|     | ssistance   | ARCH  | 4RCH  | ARCH   | 4RCH   | \RCH   | 4RCH   | \RCH   | ARCH   | RCH  | IRCH   | RCH  | КСН  | ксн  | RCH  | RCH  |
|-----|---|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|
| (h) | Purpose of grant or assistance                    | SUPPORT OF RESEARCH<br>ACTIVITIES   | SUPPORT OF RESEARCH<br>ACTIVITIES   | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  | SUPPORT OF RESEARCH<br>ACTIVITIES  |
| (B) | Description of non-cash assistance                | Addition in the second |   | THE PARTY AND TH | THE PARTY OF THE P | THE REAL PROPERTY OF THE PROPE | To the state of th | THE PARTY OF THE P | 1770   | The second secon | TOTAL CONTRACTOR OF THE CONTRA |  | THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY A |  |  | The state of the s |
| (£) | Method of valuation (book, FMV,                   |   | TO A CANADA   |  | * ************************************   |  |  |  |  |  |  |  |  |  |  |  |
| (a) | Amount of non-cash assistance                     |   |   | - mal  |  |  |  |  | The second secon |  | THE PARTY OF THE P |  |  | THE PARTY OF THE P |  |  |
| (p) | Amount of cash grant                              | 14,645  | 282,229   | 634,205  | 733,890  | 533,524  | 916,873  | 60,415   | 852,407  | 20,657   | 34,383   | 88,594   | 14,401   | 15,038   | 19,637   | 42,965   |
| (c) | IRC section if applicable                         | 501(C)(3)   | 115   | 115  | 115  | 115  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 115  | 501(C)(3)  | 501(C)(3)  | 501(C)(3)  | 115  |
| (q) | Z   | 74-6000949  | 75-6002868  | 87-6000121   | 54-6001796   | 91-6001537   | 39-1805963   | 52-2000823   | 62-0476822   | 62-0476822   | 33-0189397   | 36-6006103   | 54-6001758   | 54-6001805   | 90-0222618   | 77-0706389   |
| (a) | Name and address of organization or<br>government | (266) UNIVERSITY OF TEXAS MEDICAL<br>BRANCH AT GALVESTON<br>301 UNIVERSITY BOULEVARD,<br>GALVESTON, TX 77555-0657   | (267) UNIVERSITY OF TEXAS<br>SOUTHWESTERN MED CTR AT DALLAS<br>5323 HARRY HINES BLVD, DALLAS, TX<br>75390 | (268) UNIVERSITY OF UTAH<br>201 S 1460 E, SALT LAKE CITY, UT 84112   | (269) UNIVERSITY OF VIRGINIA<br>1 COLLEGE PARK, WISE, VA 24293   | (270) UNIVERSITY OF WASHINGTON<br>1410 NE CAMPUS PARKWAY, SEATTLE, WA<br>98195   | (271) UNIVERSITY OF WISCONSIN-MADISON<br>760 UNIVERSITY AVENUE, 4TH FLOOR,<br>A.W. PETERSON BUILDING, MADISON, WI<br>53706-1490  | (272) VAN ANDEL RESEARCH INSTITUTE<br>333 BOSTWICK AVE. NE, GRAND RAPIDS,<br>MI 49503  | (273) VANDERBILT UNIVERSITY<br>2201 WEST END AVE., NASHVILLE, TN<br>37235  | (274) VANDERBILT UNIVERSITY MEDICAL<br>CENTER<br>CCC-3322 MEDICAL CENTER NORTH,<br>NASHVILLE, TN 37232-2103  | (275) VETERANS MEDICAL RESEARCH<br>FOUNDATION OF SAN DIEGO<br>3350 LA JOLLA VILLAGE DR., SAN DIEGO,<br>CA 92161  | (278) VILLAGE OF SKOKIE HEALTH<br>DEPARTMENT<br>5127 OAKTON STREET, SKOKIE, IL 60077 | (277) VIRGINIA COMMONWEALTH<br>UNIVERSITY<br>P.O. BOX 980568, RICHMOND, VA 23298-<br>0568  | (278) VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY OFFICE OF SPONSORED PROGRAMS, 300 TURNER STREET NW, BLACKSBURG, VA 24061   | (279) WAKE FOREST UNIVERSITY HEALTH<br>SCIENCES<br>1834 WAKE FOREST RD, WINSTON-SALEM,<br>NC 27106 | (280) WALTER REED NATIONAL MILITARY<br>MEDICAL CENTER<br>8901 ROCKVILLE PIKE, BETHESDA, MD<br>20889  |

| (a)   | (q)        | (၁)                       | (p)                  | (e)                           | (J)   | (6)  | (h)                               |
|---|------------|---------------------------|----------------------|-------------------------------|---|--|-----------------------------------|
| Name and address of organization or<br>government   | Z<br>III   | IRC section if applicable | Amount of cash grant | Amount of non-cash assistance | Method of valuation (book, FMV, appraisal, other) | Description of non-cash<br>assistance  | Purpose of grant or assistance    |
| (281) WASHINGTON UNIVERSITY IN ST.<br>LOUIS<br>ONE BROOKINGS DR. ST. LOUIS, MO 63130            | 43-0653611 | 501(C)(3)                 | 718,315              |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (282) WAYNE STATE UNIVERSITY<br>P.O. BOX 02759, DETROIT, MI 48202                               | 38-3555142 | 501(C)(3)                 | 57,303               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (283) WEILL CORNELL MEDICAL COLLEGE<br>445 E 69TH STREET, NEW YORK, NY 10021                    | 13-1623978 | 501(C)(3)                 | 109,209              |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (284) WESTED<br>730 HARRISON STREET, SAN FRANCISCO,<br>CA 94107                                 | 94-3233542 | 115                       | 19,642               |                               | 444   | A Company of the Comp | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (285) WESTSIDE INSTITUTE FOR SCIENCE<br>AND EDUCATION<br>820 S. DAMEN AVENUE, CHICAGO, IL 60612 | 36-3712391 | 501(C)(3)                 | 68,568               |                               |   | And the second s | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (286) WRIGHT STATE UNIVERSITY<br>3640 COLONEL GLENN HWY, DAYTON, OH<br>45435                    | 31-0732831 | 115                       | 16,360               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |
| (287) YALE UNIVERSITY<br>140 PROSPECT ST, NEW HAVEN, CT 06511                                   | 06-0646973 | 501(C)(3)                 | 199,476              |                               |   | The second secon | SUPPORT OF RESEARCH ACTIVITIES    |
| (288) YMCA OF THE USA<br>101 NORTH WACKER DRIVE, CHICAGO, IL<br>60606                           | 36-3258696 | 501(C)(3)                 | 13,501               |                               |   |  | SUPPORT OF RESEARCH<br>ACTIVITIES |

| Dotum Deference Ide-46  |   |
|---|---|
| Return Reference - Identifier SCHEDULE I, PART I, LINE                | LADICITAGOT   |
| 2 - PROCEDURES FOR<br>MONITORING USE OF<br>GRANT FUNDS.               | EXPLANATION: GRANTS GIVEN TO SUPPORT OF CHARITABLE COMMUNITY ORGANIZATIONS. SUCH GRANTS ARE EXTENDED ONLY FOR CHARITABLE PURPOSES TO ORGANIZATIONS THAT ARE EXEMPT UNDER CODE SECTION 501(C)(3). AFTER QUALIFICATIONS FOR THE GRANT ARE MET AND THE GRANT IS DISBURSED TO THE CHARITABLE ORGANIZATION THERE IS NO SUBSEQUENT MONITORING BY THE UNIVERSITY. GRANTS OR OTHER ASSISTANCE ARE AWARDED TO ORGANIZATIONS OR ENTITIES IN THE U.S. PURSUANT TO THE UNIVERSITY POLICIES AND PROCEDURES FOR ALL GRANT SUBAWARDS. SUCH SUBAWARDS ARE MONITORED THROUGH THE UNIVERSITY'S OFFICE FOR SPONSORED RESEARCH (OSR) AND THE UNIVERSITY'S OFFICE OF ACCOUNTING SERVICES FOR RESEARCH AND SPONSORED PROGRAMS (ASRSP). ALL SUBAWARD DOCUMENTATION INCLUDING PURCHASE ORDERS, RELATED CHARGES AND INVOICES ARE REVIEWED AND MONITORED BY ASRSP AND CONFIRMED WITH THE PRINCIPAL INVESTIGATOR. THE PRINCIPAL INVESTIGATOR MUST CERTIFY THAT THE SUBAWARD COSTS ARE IN ACCORDANCE WITH THE OFFICE OF MANAGEMENT AND BUDGET'S (OMB) UNIFORM GUIDANCE (UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS); ALSO, ASRSP REQUIRED BY THE UNIFORM GUIDANCE. IF THE INFORMATION IS NOT FURNISHED TO ASRSP, PAYMENT MAY BE WITHHELD. |
| SCHEDULE I, PART II,<br>COLUMN A - NAME AND<br>ADDRESS OF             | ADLER PLANETARIUM & ASTRONOMY MUSEUM  |
| ORGANIZATION OR GOVERNMENT  | 1300 SOUTH LAKE SHORE DRIVE, CHICAGO, IL 60605  |
| SCHEDULE I, PART II,<br>COLUMN A - NAME AND<br>ADDRESS OF             | AGING & IN-HOME SERVICES OF NORTHEAST INDIANA, INC.   |
| ORGANIZATION OR<br>GOVERNMENT   | 2927 LAKE AVENUE, FORT WAYNE, IN 46805  |
| SCHEDULE I, PART II,<br>COLUMN A - NAME AND<br>ADDRESS OF             | AIDS FOUNDATION OF CHICAGO  |
| ORGANIZATION OR<br>GOVERNMENT   | 200 W JACKSON BLVD., SUITE 2100, CHICAGO, IL 60606  |
| SCHEDULE I, PART II,<br>COLUMN A - NAME AND<br>ADDRESS OF             | ALLIANCE OF CHICAGO COMMUNITY HEALTH SERVICES, LLC  |
| ORGANIZATION OR<br>GOVERNMENT   | 215 W. OHIO ST, 4TH FLOOR, CHICAGO, IL 60654  |
| SCHEDULE I, PART II,<br>COLUMN A - NAME AND<br>ADDRESS OF             | AMERICAN INSTITUTES FOR RESEARCH  |
| ORGANIZATION OR<br>GOVERNMENT   | 1000 THOMAS JEFFERSON ST NW, WASHINGTON, DC 20007   |
| SCHEDULE I, PART II ,<br>COLUMN H - PURPOSE OF<br>GRANT OR ASSISTANCE | ACCESS COMMUNITY HEALTH NETWORK: SUPPORT OF RESEARCH ACTIVITIES   |
| SCHEDULE I, PART II .   | ADLER PLANETARIUM & ASTRONOMY MUSEUM:   |
| COLUMN H - PURPOSE OF<br>GRANT OR ASSISTANCE                          | SUPPORT OF RESEARCH ACTIVITIES  |
| COLUMN H - PURPOSE OF   | ADVENTIST HEALTH SYSTEM/SUNBELT, INC.:  |
|   | SUPPORT OF RESEARCH ACTIVITIES AGING & IN-HOME SERVICES OF NORTHEAST INDIANA, INC.:   |
| COLUMN H - PURPOSE OF   | SUPPORT OF RESEARCH ACTIVITIES  |
| COLUMN H - PURPOSE OF   | AHS HOSPITAL CORP.: SUPPORT OF RESEARCH ACTIVITIES  |
| <b> </b>  | AIDS ARMS, INC.:  |
| GRANT OR ASSISTANCE   | SUPPORT OF RESEARCH ACTIVITIES  |
| COLUMN H - PURPOSE OF   | AIDS FOUNDATION OF CHICAGO: SUPPORT OF RESEARCH ACTIVITIES  |
| SCHEDULE I, PART II ,<br>COLUMN H - PURPOSE OF                        | ALBANY MEDICAL COLLEGE: SUPPORT OF RESEARCH ACTIVITIES  |
| SCHEDULE I, PART II ,<br>COLUMN H - PURPOSE OF                        | ALBERT EINSTEIN COLLEGE OF MEDICINE, INC.:  |
|   | SUPPORT OF RESEARCH ACTIVITIES ALLIANCE OF CHICAGO COMMUNITY HEALTH SERVICES, LLC:  |
| GRANT OR ASSISTANCE   | SUPPORT OF RESEARCH ACTIVITIES  |
| COLUMN H - PURPOSE OF   | AMERICAN INSTITUTES FOR RESEARCH: SUPPORT OF RESEARCH ACTIVITIES  |

| Return Reference - Identifier                        | Explanation  |
|--|--|
| PRIZES AND AWARDS                                    | PRIZES AND AWARDS REFLECT PRIZES AND AWARDS EXTENDED TO NON-EMPLOYEES IN RECOGNITION OF AN ACCOMPLISHMENT, ACTIVITY, OR EVENT. PRIZES AND AWARDS GIVEN TO EMPLOYEES ARE INCLUDED AS COMPENSATION AND REPORTED ON AN EMPLOYEE'S FORM W-2. |
| SCHEDULE I, PART III,<br>COLUMN A - TYPE OF<br>GRANT | STUDENT GRANTS, SCHOLARSHIPS, AND FELLOWSHIPS ARE FINANCIAL AID THAT CAN BE USED TOWARDS EDUCATIONAL RELATED COSTS.  |
|  | PRIZES AND AWARDS REFLECT PRIZES AND AWARDS TO NON-EMPLOYEES IN RECOGNITION OF AN ACCOMPLISHMENT, ACTIVITY, OR EVENT.  |

#### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NORTHWESTERN UNIVERSITY

Employer Identification number

36-2167817

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these Items. ✓ First-class or charter travel ☑ Housing allowance or residence for personal use ✓ Travel for companions Payments for business use of personal residence ☑ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ✓ Compensation committee ☐ Written employment contract ✓ Independent compensation consultant Compensation survey or study Form 990 of other organizations ☑ Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Ω

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B\frac{1}{1-1}) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| Note: The sum of columns (B)(I)—(III) to |   |           | W-2 and/or 1099-MIS |         | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|--|---|-----------|---------------------|---------|--------------------|----------------|----------------------|------------------|
| (A) Name and Title                       | title billing and the compensation of the properties of the deferred compensation of the deferred compensation of the deferred compensation of the deferred or profit or profit of the deferred or profit of the deferred or profit |           |                     |         |                    |                |                      |                  |
| MORTON O. SCHAPIRO                       | (i)   | 1,096,539 | 250,000             | 243,542 | 238,012            | 198,740        | 2,026,833            | 89,253           |
| 1 PRESIDENT                              | (ii)  | 0         | 0                   | _       |                    | 0              | 0                    | 0                |
| JONATHAN HOLLOWAY                        | (1)   | 317,950   | 20,000              | 149,537 | 24,333             | 13,088         | 524,908              | 0                |
| 2 PROVOST                                | (II)  | 0         | 0                   |         | 0                  |                | 0                    | 0                |
| MARY L. BAGLIVO                          | (i)   | 338,432   | 0                   | 15,220  | 27,000             | 21,830         | 402,482              | 0                |
| 3 VP GLOBAL MARKETING                    | (ii)  | 0         | 0                   | 0       | 0                  | 0              |                      | 0                |
| PAMELA S. BEEMER                         | (i)   | 386,079   | 10,000              | 19,584  | 27,000             | 4,658          | 447,321              | 0                |
| 4 VP FOR HUMAN RESOURCES                 | (ii)  | 0         | 0                   | 0       | -                  |                | _                    | 0                |
| PAUL CASTELLUCCI                         | (i)   | 299,105   | 46,928              | 50,240  | 27,000             | 680            | 423,953              | 0                |
| 5 VP BUDGET AND PLANNING                 | (ii)  | 0         | 0                   | 0       | 0                  |                | 0                    | 0                |
| NIMALAN CHINNIAH                         | (i)   | 840,410   | 100,000             | 76,434  | 117,000            | 18,296         | 1,152,140            | 0                |
| 6 EXECUTIVE VICE PRESIDENT               | (ii)  | 0         | 0                   | 0       | 0                  | 0              | 0                    | 0                |
| ALAN K. CUBBAGE                          | (i)   | 305,200   | 0                   | 27,015  | 27,000             | 15,834         | 375,049              | 0                |
| 7 VP UNIVERSITY RELATIONS                | (ii)  | 0         | 0                   | 0       | 0                  | 0              | 0                    | 0                |
| JOHN L. D'ANGELO                         | (i)   | 416,842   | 50,000              | 99,625  | 27,000             | 23,696         | 617,163              | 0                |
| 8 VP FOR FACILITIES MANAGEMENT           | (ii)  | 0         | 0                   | 0       | 0                  | 0              | 0                    | 0                |
| DEVORA GRYNSPAN                          | (i)   | 235,492   | 0                   | 1,715   | 24,000             | 9,809          | 271,016              | 0                |
| 9 VP INTERNATIONAL RELATIONS             | (ii)  | 0         | 0                   | 0       | 0                  | 0              | 0                    | 0                |
| PHILIP L HARRIS                          | (1)   | 711,513   | 100,000             | 1,379   | 57,000             | 23,966         | 893,858              | 0                |
| 10 VP GENERAL COUNSEL                    | (ii)  | 0         | 0                   | 0       | 0                  | 0              | 0                    | 0                |
| CRAIG A. JOHNSON                         | (1)   | 480,842   | 115,000             | 18,240  | 127,000            | 7,580          | 748,662              | 0                |
| 11 INTERIM SENIOR VICE PRESIDENT         | (ii)  | 0         | Ō                   | 0       | 0                  | 0              | 0                    | 0                |
| MARILYN MCCOY                            | (i)   | 437,290   | 0                   | 18,215  | 27,000             | 23,640         | 506,145              | 0                |
| 12 VP ADMINISTRATION & PLANNING          | (ii)  | 0         | Ö                   | 0       | 0                  | 0              | 0                    | 0                |
| WILLIAM H. MCLEAN                        | (i)   | 863,176   | 998,626             | 19,584  | 468,108            | 21,188         | 2,370,682            | 0                |
| 13 VP AND CHIEF INVESTMENT OFFICER       | (ii)  | 0         | 0                   | 0       | 0                  | 0              | 0                    | <u> </u>         |
| ROBERT E. MCQUINN                        | (i)   | 593,077   | 136,250             | 184,234 | 192,000            | 34,118         | 1,139,679            | 86,667           |
| 14 VP FOR DEVELOPMENT                    | (ii)  | 0         | 0                   | 0       | 0                  | 1              |                      |                  |
| ERIC G. NEILSON                          | (i)   | 576,294   | 0                   | 8,141   | 19,167             | 3,156          | 606,758              | 0                |
| 15 VP MEDICAL AFFAIRS                    | (11)  | O         | 0                   | 0       | 0                  | 0              | 0                    | 0                |
| (SEE STATEMENT)                          | (i)   |           |                     |         |                    |                |                      |                  |
| 16                                       | (ii)  |           |                     |         |                    |                |                      |                  |

| (a)   |             |                          | (b)                                       |   | (c)                            | (d)        | (e)              | (f)   |
|---|-------------|--------------------------|---|---|--------------------------------|------------|------------------|---|
| Name  |             | Breakdown of W           | -2 and/or 1099-MIS                        | C compensation                            | Retirement and                 | Nontaxable | Total of columns | Compensation                                    |
|   |             | (i) Base<br>Compensation | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>reportable<br>compensation | other deferred<br>compensation | benefits   | (b)(i)-(d)       | reported in prior<br>Form 990 or Form<br>990-EZ |
| (16) JAMES J. PHILLIPS<br>VP ATHLETICS                      | _(i)_       | 1,021,688                | 585,500                                   | 287,342                                   | 147,000                        | 23,473     | 2,065,003        | 0   |
| VEATRLETICS   | <u>(ii)</u> | 0                        | 0   | 0   | 0                              | 0          | 0                | 0   |
| (17) SEAN REYNOLDS<br>VP AND CHIEF INFORMATION OFFICER      | _(i)_       | 458,390                  | 0   | 40,160                                    | 27,000                         | 7,688      | 533,238          | 0   |
| VF AND CHIEF INFORMATION OFFICER                            | (ii)        | 0                        | 0   | 0   | 0                              | 0          | 0                | 0   |
| (18) INGRID S. STAFFORD<br>VP FOR FINANCIAL OPERATIONS      | _(i)_       | 336,909                  | 0   | 20,584                                    | 27,000                         | 7,760      | 392,253          | 0   |
| VE FOR FINANCIAL OPERATIONS                                 | (ii)        | 0                        | 0   | 0   | 0                              | 0          | 0                | 0   |
| (19) PATRICIA TELLES-IRVIN<br>VP STUDENT AFFAIRS            | _(i)_       | 395,765                  | 50,000                                    | 58,184                                    | 27,000                         | 23,696     | 554,645          | 0   |
|   | (ii)        | 0                        | 0   | 0   | 0                              | . 0        | 0                | 0   |
| (20) JOSEPH T. WALSH, JR.<br>IVP FOR RESEARCH               | _(i)_       | 370,400                  | 0   | 19,032                                    | 27,000                         | 40,567     | 456,999          | 0   |
| VI TOTT RESERVENT   | (ii)        | 0                        | 0   | 0.  | 0                              | 0          | 0                | 0   |
| (21) PATRICK W. FITZGERALD II<br>HEAD COACH                 | _(i)_       | 4,064,960                | 307,500                                   | 714,197                                   | 27,000                         | 31,280     | 5,144,937        | 0   |
| TILAD COACIT  | (ii)        | 0                        | 0   | 0   | 0                              | 0          | 0                | 0   |
| (22) CHRISTOPHER R. COLLINS<br>THEAD COACH                  | (i)         | 2,356,097                | 50,000                                    | 51,075                                    | 77,000                         | 31,057     | 2,565,229        | 0   |
|   | (ii)        | 0                        | 0]  | 0   | 0                              | 0          | 0                | 0   |
| (23) MACIEJ S LESNIAK<br>PROFESSOR NEUROLOGICAL SURGERY     | _(i)_       | 1,363,521                | 0   | 360                                       | 27,000                         | 704        | 1,391,585        | <u> </u>  |
|   | (ii)        | 0                        | 0   | 0   | 0                              | 0          | 0                | . 0   |
| (24) SALLY E BLOUNT<br>DEAN, KELLOGG                        | [.(i)_      | 696,916                  | 0   | 397,072                                   | 27,000                         | 10,238     | 1,131,226        | 0   |
|   | (ii)        | 0                        | 0   | 0   | 0                              | 0          | 0                | 0   |
| (25) PETER A. BELYTSCHKO<br> MANAGING DIRECTOR, INVESTMENTS | -(i)_       | 442,656                  | 533,505                                   | 18,360                                    | 278,071                        | 10,076     | 1,282,668        | <u> </u>  |
|   | (îi)        | 0                        | 0   | 0   | 0                              | 0          | 0                | 0   |
| (26) DANIEL I. LINZER<br>FORMER PROVOST                     | (i)         | 424,382                  | 0   | 221,334                                   | 252,000                        | 40,294     | 938,010          | 0   |
| - Oranica (NOVOO)   | (ii)        | . 0                      | 0   | 0   | 0                              | 0          | 0                | 0   |

|--|

**Supplemental Information.** Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

| Return Reference - Identifier   | Explanation  |
|---|--|
|   | SCHEDULE J SUPPLEMENTAL INFORMATION  |
| 11A -   | SCHEDULE & SUFFELINIENTAL INI CHIVIATION   |
| SCHEDULE J, PART I, LINE<br>1A - FIRST-CLASS OR<br>CHARTER TRAVEL                                 | PERSONS AND THEIR FAMILY MEMBERS AND WAS NOT TREATED AS TAXABLE COMPENSATION UNDER THE EXCESS SEATING CAPACITY EXCEPTION. SIX INTERESTED PERSONS WERE PROVIDED CHARTER TRAVEL AND WAS TREATED AS A BUSINESS EXPENSE FOR FOUR OF THOSE INDIVIDUALS AND FOR TWO OF THOSE INDIVIDUALS WAS TREATED AS TAXABLE COMPENSATION.  |
|   | FOUR LISTED PERSONS TRAVELED FIRST CLASS AND WAS TREATED AS A BUSINESS EXPENSE AND NOT TREATED AS TAXABLE COMPENSATION.  |
| 1A - HEALTH OR SOCIAL<br>CLUB DUES OR<br>INITIATION FEES  | INDIVIDUAL NAME BUT THAT REFLECT INSTITUTIONAL BUSINESS REQUIREMENTS AND ARE NOT TREATED AS TAXABLE COMPENSATION. FIVE LISTED PERSONS RECEIVED REIMBURSEMENT FOR SOCIAL CLUB DUES, WHICH WERE TREATED AS TAXABLE COMPENSATION.   |
| SCHEDULE J, PART I, LINE<br>1A - HOUSING<br>ALLOWANCE OR<br>RESIDENCE FOR<br>PERSONAL USE         | THE PRESIDENT IS REQUIRED TO RESIDE IN UNIVERSITY-OWNED HOUSING WHICH IS PROVIDED FOR THE CONVENIENCE OF THE UNIVERSITY AND IS NOT TREATED AS A TAXABLE COMPENSATION PURSUANT TO INTERNAL REVENUE CODE SECTION 119. THE ANNUAL FAIR MARKET RENTAL VALUE OF THE HOUSING IS INCLUDED IN NONTAXABLE BENEFITS LISTED ON SCHEDULE J, PART II, COLUMN (D).   |
|   | SIX LISTED PERSONS WERE PROVIDED WITH HOUSING OR A HOUSING ALLOWANCE AND THE AMOUNTS WERE TREATED AS TAXABLE COMPENSATION.   |
| SCHEDULE J, PART I, LINE<br>1A - PERSONAL SERVICES  | MAID/CLEANING SERVICES AT THE PRESIDENT'S UNIVERSITY RESIDENCE. THE VALUE OF THE BENEFIT FOR CLEANING SERVICES ASSOCIATED WITH THE PERSONAL LIVING QUARTERS IS TREATED AS TAXABLE COMPENSATION.  NOMINAL CHAUFFEUR SERVICES WERE PROVIDED TO THE PRESIDENT AND THE VALUE OF THE BENEFIT IS   |
|   | TREATED AS TAXABLE COMPENSATION. PERSONAL SERVICES RELATED TO HOUSING WAS EXTENDED TO ONE OTHER INTERESTED PERSON.   |
| SCHEDULE J, PART I, LINE<br>1A - TAX<br>INDEMNIFICATION AND<br>GROSS-UP PAYMENTS                  |  |
| SCHEDULE J, PART I, LINE<br>1A - TRAVEL FOR<br>COMPANIONS   | THE PRESIDENT'S SPOUSE HAS ACCOMPANIED THE PRESIDENT AT DEVELOPMENT EVENTS FOR BUSINESS PURPOSES AND SUCH EXPENSES WERE NOT TREATED AS TAXABLE COMPENSATION. THREE LISTED PERSONS RECEIVED COMPANION TRAVEL. COMPANION TRAVEL FOR FAMILY MEMBERS OF TWO INTERESTED PERSONS QUALIFIED UNDER THE EXCESS SEATING CAPACITY EXCEPTION FOR CHARTER TRAVEL, AND COMPANION TRAVEL FOR ONE INTERESTED PERSON WAS TREATED AS A BUSINESS EXPENSE. |
| SCHEDULE J, PART I, LINE<br>4A - SEVERANCE OR<br>CHANGE-OF-CONTROL<br>PAYMENT                     | IN CONNECTION WITH HIS RETIREMENT FROM NORTHWESTERN UNIVERSITY, DANIEL LINZER RECEIVED COMPENSATION IN THE AMOUNT OF \$218,750, WHICH IS INCLUDED IN PART II, COLUMN B(III).   |
| SCHEDULE J, PART I, LINE<br>4B - SUPPLEMENTAL<br>NONQUALIFIED<br>RETIREMENT PLAN                  | THE FOLLOWING PARTICIPATED IN A 457(F) NONQUALIFIED RETIREMENT PLAN AND THE AMOUNTS ARE SUBJECT TO SUBSTANTIAL RISK OF FORFEITURE AND VEST AFTER A NUMBER OF YEARS NAME AND AMOUNT CONTRIBUTED:  |
|   | MORTON O. SCHAPIRO (\$211,012), DANIEL I. LINZER (\$225,000), CRAIG A. JOHNSON (\$100,000), NIMALAN CHINNIAH (\$90,000), PHILIP L. HARRIS (\$30,000), ROBERT E. MCQUINN (\$165,000), JAMES J. PHILLIPS (\$120,000). WILLIAM H. MCLEAN (\$441,108), PETER A. BELYTSCHKO (\$251,071), CHRIS COLLINS (\$50,000)   |
|   | NAME AND AMOUNT PAID: MORTON O. SCHAPIRO (\$164,948), WILLIAM H. MCLEAN (\$757,176), PETER A. BELYTSCHKO (\$330,166), ROBERT E. MCQUINN (\$145,150), SALLY E. BLOUNT (\$330,663)   |
| SCHEDULE J, PART I, LINE<br>5A - COMPENSATION<br>CONTINGENT ON<br>REVENUES OF THE<br>ORGANIZATION | THE CHIEF INVESTMENT OFFICER AND MANAGING DIRECTOR OF INVESTMENTS RECEIVED INCENTIVE COMPENSATION WHICH WAS IN PART CALCULATED CONTINGENT ON THE PERFORMANCE OF THE UNIVERSITY'S LONG TERM INVESTMENTS.  |
| SCHEDULE J, PART I, LINE<br>7 - NON-FIXED PAYMENTS  | THE PRESIDENT AND EIGHT INTERESTED PERSONS RECEIVED A NON-FIXED PAYMENT RELATED TO A RECOGNITION BONUS. ONE OFFICER WAS OFFERED NON-FIXED PAYMENT RELATED TO APPAREL AND TICKETS.  |
|   |  |

SCHEDULE K (Form 990) NORTHWESTERN UNIVERSITY

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,
 explanations, and any additional information in Part VI.

2017

Open to Public Inspection

► 4ttach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer Identification number 36-2167817

(ii) Pooled financing Yes No ž (n) On behalf of Issuer Yes No Δ Yes (g) Defeased Yes No 146,081,419 145,195,151 886,268 2017 ş O (ii) Description of purpose Yes 125,000,000 (SEE STATEMENT) (SEE STATEMENT) 135,800,000 (SEE STATEMENT) 2011 126,815,680 1,250,000 125,565,680 ŝ œ 8 146,017,057 (e) Issue price 2008 144,677,217 1,039,400 143,637,817 ŝ ⋖ (d) Date Issued Yes 06/04/2015 09/09/2004 06/25/2008 45203H2A9 45200BFC7 (c) CUSIP # 45200FKZ1 Were the bonds issued as part of a current refunding issue? Were the bonds issued as part of an advance refunding issue? (b) Issuer EIN 86-1091967 86-1091967 86-1091967 Has the final allocation of proceeds been made? . Working capital expenditures from proceeds Capital expenditures from proceeds Year of substantial completion . Credit enhancement from proceeds Amount of bonds legally defeased Capitalized interest from proceeds Proceeds in refunding escrows. Gross proceeds in reserve funds Issuance costs from proceeds ILLINOIS FINANCE AUTHORITY ILLINOIS FINANCE AUTHORITY ILLINOIS FINANCE AUTHORITY Offher unspent proceeds . Amount of bonds retired (a) issuer name Other spent proceeds. Total proceeds of issue Bond Issues Proceeds Part Part II S ဖ 4 Φ ø 10 16 œ 4 <u>က</u>

Part III Private Business Use

final allocation of proceeds?

Does the organization maintain adequate books and records to support the

| , |   | ¥   |          |     | m |     | 0 |     |
|---|---|-----|----------|-----|---|-----|---|-----|
| - | Was the organization a partner in a partnership, or a member of an LLC,     | Yes | No       | Yes | ş | Yes | 2 | Yes |
|   | which owned property financed by tax-exempt bonds?                          |     | <i>,</i> |     | > |     | , |     |
| N | Are there any lease arrangements that may result in private business use of |     |          |     |   |     |   |     |
|   | bond-financed property?   | `   |          | ,   |   |     | • |     |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 50193E

Schedule K (Form 990) 2017

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| Part III Private | Private Business Use (Continued)   |            |             |             |             |   |             |   |   |
|------------------|--|------------|-------------|-------------|-------------|---|-------------|---|---|
|                  |  | A          |             | В           |             | O                                       |             | 0                                       |   |
| 3a Are           | Are there any management or service contracts that may result in private   | Yes        | No          | Yes         | Š           | Yes                                     | S.          | Yes                                     | No                                      |
| pusi             | business use of bond-financed property?  | `          |             | `           |             | `                                       |             |   |   |
| b If "Ye<br>coun | of the sation of the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?  |            | `           |             | `           |   | `           |   |   |
| c Are 1<br>bond  | Are there any research agreements that may result in private business use of bond-financed property?   | •          |             | >           |             |   | `           |   |   |
| d If "Y.         | If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?   |            | `           |             | ,           |   |             |   |   |
| 4 Enter          | Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶  |            | %           |             | %           |   | %           |   | %                                       |
| 5 Enterresul     | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶ |            | 0.65 %      |             | 0.39 %      |   | 1.58 %      |   | %                                       |
| 6 Tota           | Total of lines 4 and 5   |            | 0.65 %      |             | 0.39 %      |   | 1.58 %      |   | %                                       |
| 7 Does           | neet the private security or payment test?   |            | >           |             | >           |   | <b>,</b>    |   |   |
| 8a Hast<br>nong  | Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?   |            | `           |             | `           |   | <i>*</i>    |   |   |
| dsib             | If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of  |            | %           |             | %           |   | %           |   | %                                       |
| c If TY          | If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?  |            |             |             |             |   |             |   |   |
| 9 Has            | Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?                             | `          |             | `           |             | `                                       |             |   |   |
| Part IV          | Arbitrage  |            |             | •           |             |   |             |   |   |
|                  |  | A          |             | 8           |             | O                                       |             |   |   |
| 1 Has            | Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and  | Yes        | No.         | Yes         | No          | Yes                                     | S,          | Yes                                     | No                                      |
| Pen<br>2         | Penarry In Lieu of Arbitrage Rebate?   |            | ,           |             | <b>&gt;</b> | *************************************** | <b>&gt;</b> | *************************************** |   |
| _                | Rebate not due yet?  |            | `           |             | <b>,</b>    | , t                                     |             |   | *************************************** |
| b Exc            | e?   |            | `           |             | ,           |   | <b>,</b>    |   |   |
| c Nor            | No rebate due?   | ,          |             | <b>,</b>    |             |   | <i>*</i>    |   |   |
| الا ال<br>perf   | If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed  | 09/09/2009 | 8           | 06/25/2018  | 2018        |   | , .         |   |   |
| 3 Isth           | Is the bond issue a variable rate issue?   | ,          |             | ,           |             |   | ,           |   |   |
| 4a Has           | Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?   |            | <b>&gt;</b> | <i>&gt;</i> |             |   | <b>&gt;</b> |   |   |
| b Nan            | Name of provider   |            |             | SEE PART VI | , ,         |   |             |   |   |
|                  | Term of hedge  | _          |             | 5.0         | ,           |   |             |   |   |
|                  | Was the hedge superintegrated?   |            |             |             | <b>,</b>    |   |             |   |   |
| A A              | was the neuge terminated?  |            |             |             | >           |   |             | Sobodulo V G                            | Schoolide V Germ 000 0017               |
|                  |  |            |             |             |             |   |             | oction in the                           | UIIII 330) 20:1                         |

Schedule K (Form 990) 2017

Page 3

Schedule K (Form 990) 2017 ŝ ŝ ۵ ۵ Yes Yes 2 ž O O Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions χes Yes Ŷ ŝ М Yes Yes ş ş ⋖ Yes Yes Has the organization established written procedures to monitor the Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program it self-remediation isn't available under d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? 6 Were any gross proceeds invested beyond an available temporary period? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? Procedures To Undertake Corrective Action Arbitrage (Continued) requirements of section 148? applicable regulations? b Name of provider c Term of GIC (SEE STATEMENT) Part V

| Part | V |
|------|---|
|------|---|

**Supplemental Information.** Supplemental Information Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

| Return Reference - Identifier  | Explanation  |
|--|--|
| SCHEDULE K, PART I,<br>COLUMN (C) - BOND<br>ISSUE A: IFA-SERIES 2004   | ADDITIONAL CUSIP: 45200B FD5   |
| SCHEDULE K, PART I,<br>COLUMN (C) - BOND<br>ISSUE B: IFA - SERIES<br>2008                                      | ADDITIONAL CUSIPS: 45200F LA5, 45200F LB3  |
| SCHEDULE K, PART I,<br>COLUMN (F) -<br>DESCRIPTION OF<br>PURPOSE<br>ISSUER NAME: ILLINOIS<br>FINANCE AUTHORITY | ACQUIRE, CONSTRUCT OR RENOVATE UNIVERSITY FACILITIES   |
| SCHEDULE K, PART I,<br>COLUMN (F) -<br>DESCRIPTION OF<br>PURPOSE<br>ISSUER NAME: ILLINOIS<br>FINANCE AUTHORITY | ACQUIRE, CONSTRUCT OR RENOVATE UNIVERSITY FACILITIES & EQUIPMENT   |
| SCHEDULE K, PART I,<br>COLUMN (F) -<br>DESCRIPTION OF<br>PURPOSE<br>ISSUER NAME: ILLINOIS<br>FINANCE AUTHORITY | ACQUIRE, CONSTRUCT OR RENOVATE UNIVERSITY FACILITIES   |
| SCHEDULE K, PART I,<br>COLUMN (F) - PURPOSES   | IN ADDITION TO THE PURPOSES LISTED IN PART I, COLUMN (F), BONDS WERE ALSO ISSUED TO PAY COSTS<br>OF ISSUANCE.  |
| SCHEDULE K, PART II,<br>LINE 3 - TOTAL<br>PROCEEDS OF ISSUE  | THE DIFFERENCE BETWEEN ISSUE PRICES AND PROCEEDS OF BONDS ARE A RESULT OF INVESTMENT INCOME EARNED.  |
| SCHEDULE K, PART III,<br>LINE 3B - REVIEWS BY<br>BOND COUNSEL  | THE UNIVERSITY ENGAGES BOND COUNSEL AND PERFORMS A REVIEW OF MANAGEMENT OR SERVICES CONTRACTS AT THE TIME OF ANY NEW BOND ISSUANCES, GENERALLY EVERY TWO YEARS. AT THAT TIME ALL EXISTING BOND ISSUANCES AND PRIVATE USE ARE RE-EXAMINED AND RE-DOCUMENTED. THE UNIVERSITY MONITORS CHANGES IN PRIVATE USE ON AN ONGOING BASIS INTERNALLY. |
| SCHEDULE K, PART III,<br>LINE 4 - PRIVATE<br>BUSINESS USE  | THE UNIVERSITY FINANCES ACQUISITION, CONSTRUCTION AND RENOVATION OF UNIVERSITY FACILITIES WITH MULTIPLE FUNDING SOURCES INCLUDING TAX EXEMPT BOND ISSUES. THERE IS A SMALL AMOUNT OF MONITORED PRIVATE BUSINESS USE WITHIN THE FACILITIES PARTIALLY FUNDED BY BONDS; HOWEVER, SUCH USAGE WAS FINANCED FROM OTHER SOURCES.                  |
| SCHEDULE K, PART IV,<br>LINE 2C - COLUMN A   | ISSUER NAME: ILLINOIS FINANCE AUTHORITY<br>THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 09/09/2009   |
| SCHEDULE K, PART IV,<br>LINE 2C - COLUMN B   | ISSUER NAME: ILLINOIS FINANCE AUTHORITY<br>THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 06/25/2018   |
| SCHEDULE K, PART IV,<br>LINE 4B - BOND ISSUE B:<br>IFA - SERIES 2008   | MORGAN STANLEY CAPITAL SERVICES LLC; BANK OF AMERICA, NA; JP MORGAN  |

### SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

| NOF        | rthwestern Univer:                 | SITY                              |                                 |                 |                                       |   |                   |   |          | 36-  | 21678      | 317                                     |            |       |
|------------|------------------------------------|-----------------------------------|---------------------------------|-----------------|---------------------------------------|---|-------------------|---|----------|--|------------|---|------------|-------|
| Pa         | rt i Excess Bene<br>Complete if th | fit Transaction<br>e organization | ns (section 501<br>answered "Ye | (c)(3)<br>s" on | ), section<br>Form 99                 | 501(c)(4), a<br>0, Part IV,             | and 50<br>line 25 | 11(c)(29) organiz<br>5a or 25b, or Fo   | ations   | s only   | ).<br>Part | V, line                                 | 40b.       |       |
| 1          | (a) Name of disqualified           |                                   | (b) Relationship be             |                 |                                       | *************************************** | Τ                 |   |          |  |            |   | (d) Cor    |       |
|            | (a) Name of disquained             | person                            |                                 | organi          |                                       |   |                   | (c) Description                         | n or tra | nsacuo   | n          |   | Yes        | No    |
| _(1)       |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (2)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| _(3)       |                                    |                                   |                                 |                 |                                       | *************************************** |                   |   |          |  |            |   |            |       |
| <u>(4)</u> |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (5)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (6)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| 2          | Enter the amount                   |                                   | d by the organ                  | nizatio         | on manag                              | gers or dis                             | squalifi          | ied persons du                          | ring t   | he ye  | ar         |   |            |       |
|            | under section 4958                 |                                   |                                 |                 |                                       |   |                   |   |          |  | • (        | <u> </u>                                |            |       |
| 3          | Enter the amount o                 | ftax, if any, on                  | line 2, above,                  | reimi           | bursed by                             | the organ                               | ization           | ι                                       |          |  | •          | \$                                      |            |       |
| D-1        |                                    | ·                                 |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| Pai        | Loans to and                       | or From Inter                     | rested Person                   | S,              | Form 00                               | 0 E7 Dost                               | V lina            | . 00a or Farm 00                        | 10 D.    |  | 15 C       |   | # AL -     |       |
|            | organization n                     | e organization<br>eported an am   | ount on Form 9                  | 8 ON<br>190. F  | romiss<br>Part X. lin                 | u-EZ, Part<br>e 5. 6. or 2              | v, iine<br>ว      | 38a or Form 99                          | 90, P8   | iπ IV,   | iine 2     | 6; or                                   | t tne      |       |
|            |                                    | T                                 | I                               | · ·             |                                       | 1                                       | <u></u>           |   |          |  |            |   |            |       |
| (a) l      | Name of interested person          | (b) Relationship                  | (c) Purpose of                  |                 | Loan to or                            | (e) Origi                               |                   | (f) Balance due                         | (g) In ( | default?   |            | proved                                  |            | ilten |
|            |                                    | with organization                 | toan                            |                 | rom the<br>anization?                 | principal ar                            | nount             |   |          |  |            | no bnao<br>rittee?                      | agree      | ment? |
|            |                                    |                                   |                                 | To              | From                                  |   |                   |   |          | No.  | Vas        | T N/2                                   |            |       |
| (1)        | JAMES PHILLIPS                     | EMPLOYEE                          | COMPENSATION                    | - 10            | From ✓                                | 1 10                                    | 0,000             | 193,333                                 | Yes      | No /   | Yes        | No                                      | Yes        | No    |
| (2)        | JAMES PHILLIPS                     | EMPLOYEE                          | COMPENSATION                    |                 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |   | 0,000             | 300.000                                 |          | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \            | 1          |   | <b>∀</b>   |       |
| (3)        | O/MICO I THECH O                   | LIMI COTEL                        | COM LIGATION                    |                 | <b>Y</b>                              | 30                                      | 0,000             | 300,000                                 |          | <b>  '</b>                                       | <b>V</b>   |   | <b>V</b>   | ~     |
| (4)        |                                    |                                   |                                 |                 | •                                     |   |                   |   |          | <del> </del>                                     |            |   |            |       |
| (5)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (6)        |                                    |                                   |                                 |                 |                                       |   |                   | ····                                    |          | <del> </del>                                     |            |   |            |       |
| (7)        |                                    |                                   |                                 |                 |                                       |   |                   | *************************************** |          | <del> </del>                                     |            |   |            |       |
| (8)        |                                    |                                   |                                 |                 |                                       |   |                   | *************************************** |          | <del> </del>                                     | <b></b> -  |   |            |       |
| (9)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          | <del> </del>                                     | <b></b>    |   |            |       |
| (10)       |                                    |                                   |                                 |                 |                                       |   |                   |   |          | <del>                                     </del> |            |   |            |       |
| Tota       | l                                  |                                   |                                 |                 |                                       |   |                   | \$ 493,333                              |          |  |            | 1                                       |            |       |
| Par        | III Grants or Ass                  | Istance Bener                     | fitina Interest                 | ed Pe           | ersons.                               |   |                   | *************************************** |          |  |            |   |            |       |
|            | Complete if th                     | e organization                    | answered "Yes                   | s" on           | Form 99                               | 0, Part IV, I                           | ine 27            | -                                       |          |  |            |   |            |       |
| (8         | ) Name of Interested person        | (b) Relations                     | ship between intere             | sted            | (c) Amount                            | of assistance                           | to                | J) Type of assistance                   |          | (e)  | Puro       | se of a                                 | sistan     | 20    |
| •          |                                    |                                   | und the organizatio             |                 |                                       |   |                   | -, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | •        | ("   | , a p      | ,00 U, Q                                | 2010112111 |       |
| (1)        |                                    |                                   |                                 |                 |                                       | 7,695                                   | SCHO              | DLARSHIP                                |          | EDUC   | OITA       | AAL SC                                  | HOLAF      | RSHIP |
| (2)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (3)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            | *************************************** |            |       |
| (4)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            | ***                                     |            |       |
| (5)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (6)        |                                    |                                   |                                 |                 |                                       | *************************************** |                   |   |          |  |            |   |            |       |
| (7)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (8)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (9)        |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |
| (10)       |                                    |                                   |                                 |                 |                                       |   |                   |   |          |  |            |   |            |       |

|   | (b) Relationship between<br>interested person and the<br>organization | (c) Amount of<br>transaction | (d) Description of transaction        | organi<br>reve | nues<br>nues |
|---|---|------------------------------|---------------------------------------|----------------|--------------|
|   |   |                              | Lines .                               | Yes            | N            |
| (SEE STATEMENT)                         |   |                              |                                       |                | <u> </u>     |
|   |   |                              | · · · · · · · · · · · · · · · · · · · |                | -            |
|   |   |                              |                                       |                | -            |
|   |   |                              |                                       |                | ļ            |
|   |   |                              | 1                                     |                | T            |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
| *************************************** |   |                              |                                       |                | _            |
| V Supplemental Information              |   |                              |                                       |                | <u> </u>     |
|   |   |                              |                                       | . <del> </del> |              |
|   |   |                              |                                       |                |              |
|   | ~   |                              |                                       |                |              |
|   | ***************************************                               |                              |                                       |                |              |
|   |   | <del></del>                  |                                       | <del>-</del>   |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
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|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |
|   |   |                              |                                       |                |              |

| (a) Name of interested person  | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction         | (e) Sharing of organization's | ring of |
|--|---|---------------------------|--|-------------------------------|---------|
|  | ,   |                           |  | revenues?                     | res?    |
| THE TRANSPORT OF THE TR |   |                           |  | Yes                           | Š       |
| (1) CHARLOTTE CUBBAGE  | FAMILY MEMBER OF ALAN K.<br>CUBBAGE, OFFICER                    | \$40,902                  | \$40,902 EMPLOYMENT                    |                               | >       |
| (2) JENNIFER BURKE   | FAMILY MEMBER OF JOSEPH T.<br>WALSH, OFFICER                    | \$58,416                  | \$58,416 EMPLOYMENT                    |                               | >       |
| (3) GREAT LAKES COCA-COLA  | M. JUDE REYES, TRUSTEE,<br>OWNERSHIP INTEREST OVER 35%          | \$966,539                 | \$966,539 VENDING COMMISSIONS          |                               | >       |
| (4) SQ ADVISORS LLC  | KIMBERLY QUERREY, TRUSTEE,<br>OWNERSHIP INTEREST OVER 35%       | \$1,374,871               | \$1,374,871 INVESTMENT MANAGER FEES    |                               | >       |
| (5) CONSTADINA CASTELLUCCI   | FAMILY MEMBER OF PAUL<br>CASTELLUCCI, OFFICER                   | \$66,551                  | \$66,551 EMPLOYMENT                    |                               | >       |
| (6) ALISSA SCHAPIRO  | FAMILY MEMBER OF MORTON<br>SCHAPIRO, OFFICER                    | \$10,572                  | \$10,572 GRADUATE ASSISTANT EMPLOYMENT |                               | >       |

### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047 2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part iV, lines 29 or 30.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Employer identification number Name of the organization 36-2167817 NORTHWESTERN UNIVERSITY

| Part     | Types of Property  |                               |  |   |  |
|----------|--|-------------------------------|--|---|--|
|          |  | (a)<br>Check if<br>applicable | (b) Number of contributions or Items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d)<br>Method of determining<br>noncash contribution amounts |
| 1        | Art-Works of art   | 1                             | 43   | 4,140,745   | MARKET VALUE   |
| 2        | Art—Historical treasures                                       | <u> </u>                      |  |   |  |
| 3        | Art—Fractional Interests                                       | ·                             |  | - 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1                                   |  |
| 4        | Books and publications   |                               |  | 12,266,308  | MARKET VALUE   |
| 5        | Clothing and household   | <u> </u>                      |  |   |  |
|          | goods  | 1                             |  | 1.824   | MARKET VALUE   |
| 6        | Cars and other vehicles  |                               | g 19 g   |   |  |
| 7        | Boats and planes   |                               |  |   |  |
| 8        | intellectual property  |                               |  |   |  |
| _        | Securities—Publicly traded                                     | <b></b>                       | 776  | 35,376,131  | MARKET VALUE   |
| 9        | Securities—Publicly traded Securities—Closely held stock .     | <del>-</del>                  |  | 50,0.0,   |  |
| 10<br>11 | Securities—Closely field stock .  Securities—Partnership, LLC, |                               |  |   |  |
| ••       | or trust interests   | <b> </b>                      | 1  | 16,190,270  | MARKET VALUE   |
| 40       |  | <b></b>                       |  | 10,100,210  | 113337127 171202   |
| 12       | Securities—Miscellaneous                                       |                               |  |   |  |
| 13       | Qualified conservation   |                               |  |   |  |
|          | contribution—Historic structures                               |                               |  |   |  |
|          |  | <u> </u>                      |  |   |  |
| 14       | Qualified conservation contribution—Other                      |                               |  |   |  |
|          |  | <u> </u>                      |  |   |  |
| 15       | Real estate—Residential  | ļ                             |  |   |  |
| 16       | Real estate—Commercial   | ļ                             |  |   |  |
| 17       | Real estate—Other  |                               |  |   |  |
| 18       | Collectibles   |                               |  | 00.040  | NACYCE VALUE   |
| 19       | Food inventory   | <b>✓</b>                      | 16   | 22,640  | MARKET VALUE   |
| 20       | Drugs and medical supplies                                     |                               |  |   |  |
| 21       | Taxidermy  |                               |  | - Lucianianianianianianianianianianianianiani                             |  |
| 22       | Historical artifacts   |                               |  |   |  |
| 23       | Scientific specimens   |                               |  | - Livering  |  |
| 24       | Archeological artifacts  |                               |  |   |  |
| 25       | Other ► ( EQUIPMENT, SOFTWARE )                                | <u> </u>                      | 15   | 1,359,419   |  |
| 26       | Other ► ( EVENTS, TICKETS )                                    |                               | 218  | 1,123,386   | MARKET VALUE   |
| 27       | Other ► ()   |                               |  |   |  |
| 28       | Other ► (  |                               |  |   |  |
| 29       | Number of Forms 8283 received                                  | by the or                     | ganization during the tax y                      | ear for contributions for   |  |
|          | which the organization completed                               | l Form 828                    | 3, Part IV, Donee Acknowle                       | agement   | 29 5<br>Yes No   |
|          |  |                               |  |   |  |
| 30a      | During the year, did the organiza                              | tion receive                  | e by contribution any prope                      | erty reported in Part I, lines  | s 1 through  |
|          | 28, that it must hold for at least t                           | hree years                    | from the date of the initial                     |   |  |
|          | to be used for exempt purposes                                 | for the enti                  | re holding period?                               |   | · · ·   30a   🗸  |
| ь        | If "Yes," describe the arrangement                             | it in Part II.                |  |   |  |
| 31       | Does the organization have a                                   | gift acce                     | ptance policy that require                       | es the review of any n  |  |
|          | contributions?   |                               |  |   | 31 🗸   |
| 32a      | Does the organization hire or us                               | e third par                   | ties or related organization                     | s to solicit, process, or so  | ell noncash  |
|          | contributions?   |                               |  |   | 32a ✓  |
| b        | If "Yes," describe in Part II.                                 |                               |  |   |  |
| 33       | If the organization didn't report an describe in Part II.      | amount in                     | column (c) for a type of pro                     | perty for which column (a)  | is checked,  |

| Part II | Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and   |
|---------|---|
|         | whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.   |
|         | i control and a |

| Return Reference - Identifier      | Explanation   |
|------------------------------------|---|
| SCHEDULE M, PART I -<br>COLUMN (B) | THE UNIVERSITY IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED. |

## SCHEDULE O (Form 990 or 990-EZ)

Department of Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

▶ Go to www irs gov/Form990 for the latest information.

OMB No. 1545-0047 2017

Open to Public Inspection

Name of the Organization NORTHWESTERN UNIVERSITY

Employer Identification Number 36-2167817

| Return Reference - Identifier   | Explanation  |
|---|--|
| FORM 990, PART VI, LINE 1A -<br>DELEGATE BROAD AUTHORITY<br>TO A COMMITTEE                          | EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES IS COMPRISED OF 20 MEMBERS OF THE GOVERNING BODY. THE EXECUTIVE COMMITTEE MAY EXERCISE THE POWER OF THE BOARD OF TRUSTEES BETWEEN MEETINGS WITH RESPECT TO ORDINARY BUSINESS TRANSACTIONS.  |
| FORM 990, PART VI, LINE 2 -<br>FAMILY/BUSINESS<br>RELATIONSHIPS AMONGST<br>INTERESTED PERSONS       | JAY C. HOAG AND PATRICK G. RYAN JR BUSINESS RELATIONSHIP M. JUDE REYES AND A. STEVEN CROWN - BUSINESS RELATIONSHIP M. JUDE REYES AND PATRICK RYAN JR BUSINESS RELATIONSHIP M. JUDE REYES AND FREDERICK H. WADDELL - BUSINESS RELATIONSHIP DAVID B. WEINBERG AND M. JUDE REYES - BUSINESS RELATIONSHIP MILES D. WHITE AND WILLIAM A. OSBORN - BUSINESS RELATIONSHIP MUNEER A. SATTER AND WILLIAM A. OSBORN - BUSINESS RELATIONSHIP MUNEER A. SATTER AND PATRICK RYAN JR BUSINESS RELATIONSHIP MUNEER A. SATTER AND CHRISTOPHER B. GALVIN - BUSINESS RELATIONSHIP FREDERICK H. WADDELL AND WILLIAM A. OSBORN - BUSINESS RELATIONSHIP JAY C. HOAG AND WILLIAM MCLEAN - BUSINESS RELATIONSHIP  |
| FORM 990, PART VI, LINE 10A -<br>LOCAL CHAPTERS, BRANCHES   | THE UNIVERSITY DOES NOT HAVE LOCAL CHAPTERS, BRANCHES, LODGES, UNITS OR SIMILAR AFFILIATES. AS DESCRIBED IN SCHEDULE F, THE UNIVERSITY HAS ONE INTERNATIONAL CAMPUS, LOCATED IN DOHA, QATAR. THE UNIVERSITY HAS A NUMBER OF AFFILIATION AGREEMENTS AND ARRANGEMENTS WITH OTHER RESEARCH AND EDUCATIONAL INSTITUTIONS BUT THE UNIVERSITY DOES NOT HAVE AUTHORITY TO EXERCISE SUPERVISION AND CONTROL OF SUCH INSTITUTIONS.  |
| FORM 990, PART VI, LINE 11B -<br>REVIEW OF FORM 990 BY<br>GOVERNING BODY                            | AN ELECTRONIC COPY OF THE UNIVERSITY'S FINAL FORM 990 (INCLUDING ALL REQUIRED SCHEDULES), WAS PROVIDED TO EACH VOTING MEMBER OF THE UNIVERSITY'S GOVERNING BODY PRIOR TO FILING, THAT VERSION OF THE FORM 990 IS IDENTICAL TO THE ONE ULTIMATELY FILED WITH THE IRS. PRIOR TO PROVIDING A COPY TO THE GOVERNING BODY, A DRAFT OF THE FORM 990 WAS PROVIDED FOR REVIEW TO THE AUDIT, RISK, AND COMPLIANCE COMMITTEE OF THE BOARD OF TRUSTEES, WHICH IS COMPRISED OF A SUBSET OF MEMBERS FROM THE GOVERNING BODY WHO REVIEW THE ACCOUNTING PROCEDURES AND CONTROLS OF THE UNIVERSITY.  |
| FORM 990, PART VI, LINE 12C -<br>CONFLICT OF INTEREST<br>POLICY                                     | UNIVERSITY BYLAWS AND STATUTES REQUIRE THAT ANY CONFLICT OF INTEREST OF ANY TRUSTEE, OFFICER OR THEIR IMMEDIATE FAMILIES BE DISCLOSED TO THE BOARD OF TRUSTEES IN WRITING. AN OFFICER SHALL CALL ANY CONFLICT OF INTEREST TO THE ATTENTION OF THE PRESIDENT. IF THE MATTER IS BEING CONSIDERED BY THE BOARD OF TRUSTEES OR ONE OF ITS COMMITTEES, SUCH OFFICER IS NOT PERMITTED TO PARTICIPATE IN OR MAKE RECOMMENDATIONS ABOUT THE CONFLICT OF INTEREST UNDER DISCUSSION, EXCEPT TO THE EXTENT THE OFFICER IS REQUIRED BY THE TRUSTEES OF OTHER OFFICERS TO ANSWER PERTINENT QUESTIONS RELATED TO THE CONFLICT. A TRUSTEE HAVING A CONFLICT OF INTEREST SHALL CALL IT TO THE ATTENTION OF THE BOARD OR COMMITTEE AND SHALL ABSTAIN ON VOTING ON THE SUBJECT. THE TRUSTEE IS ENCOURAGED TO ANSWER PERTINENT QUESTIONS WHEN HIS/HER KNOWLEDGE OF THE SUBJECT WILL ASSIST THE BOARD OR ANY OF ITS COMMITTEES. IN ADDITION, TRUSTEES ARE SUBJECT TO A CONFLICT OF INTEREST POLICY, WHICH HAS BEEN ADOPTED BY THE BOARD OF TRUSTEES. POTENTIAL CONFLICTS OF INTEREST ARE FURTHER SCRUTINIZED UNDER A UNIVERSITY INVESTMENT POLICY GOVERNING TRUSTEE RELATIONSHIP INVESTMENTS WHEREBY, AMONG OTHER THINGS, AFFECTED TRUSTEES MUST RECUSE THEMSELVES FROM ANY DISCUSSION AND VOTE RELATED TO THE INVESTMENT. |
|   | PURSUANT TO THE UNIVERSITY'S STAFF AND FACULTY CONFLICT OF INTEREST POLICIES, EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST TO THE UNIVERSITY ON AN ANNUAL BASIS. EMPLOYEES RECEIVE ANNUAL REMINDERS TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE AND RESPONSES ARE SUBMITTED ELECTRONICALLY AND REVIEWED BY EACH EMPLOYEE'S SUPERVISOR. POTENTIAL CONFLICTS ARE FURTHER REVIEWED BY THE UNIVERSITY'S DEPARTMENT OF HUMAN RESOURCES AND ACTION TAKEN BY SENIOR MANAGEMENT AS NEEDED.  |
| FORM 990, PART VI, LINE 15A -<br>PROCESS TO ESTABLISH<br>COMPENSATION OF TOP<br>MANAGEMENT OFFICIAL | THE COMPENSATION COMMITTEE OF THE BOARD INCLUDES MEMBERS OF THE UNIVERSITY'S GOVERNING BODY WHO ARE NOT RELATED OR CONTROLLED BY THE EMPLOYEES WHOSE COMPENSATION THEY ARE REVIEWING. TO ASSESS THE REASONABLENESS OF EMPLOYEE COMPENSATION, THE COMPENSATION COMMITTEE OF THE BOARD RELIES ON (I) FORMAL SURVEY AND COMPARABILITY DATA PREPARED AND COMPILED BY AN OUTSIDE CONSULTANT WHO HAS EXPERTISE IN THE FIELD OF EXECUTIVE COMPENSATION ASSESSMENT AND BENCHMARKING AND (II) COMPENSATION RECOMMENDATIONS FROM THE PRESIDENT AND PROVOST FOR THEIR DIRECT REPORTS. THE COMPENSATION COMMITTEE OF THE BOARD MEETS EVERY JUNE FOR THE PURPOSE OF REVIEWING AND APPROVING EXECUTIVE COMPENSATION RECOMMENDATIONS FOR THE NEXT FISCAL YEAR.  |
|   | AFTER REVIEW AND THE APPROVAL, THE COMMITTEE'S DECISIONS ARE DOCUMENTED WITH INTERNAL COMMUNICATIONS TO EXECUTIVE LEADERSHIP EXCEPT THAT THE PRESIDENT'S COMPENSATION IS COMMUNICATED SOLELY TO THE VICE PRESIDENT & GENERAL COUNSEL. THE OFFICES OF THE PRESIDENT, PROVOST AND EXECUTIVE VICE PRESIDENT SEPARATELY THEN SEND THE FINAL COMPENSATION DECISIONS TO THE PAYROLL DEPARTMENT AND THE VICE PRESIDENT OF HUMAN RESOURCES FOR IMPLEMENTATION AND PROCESSING OTHER THAN THE COMPENSATION INFORMATION OF THE PRESIDENT, WHICH IS PROVIDED BY THE VICE PRESIDENT & GENERAL COUNSEL TO THE VICE PRESIDENT OF HUMAN RESOURCES.   |

| Return Reference - Identifier   | Explanation   |  |
|---|---|--|
| FORM 990, PART VI, LINE 15B -<br>PROCESS TO ESTABLISH<br>COMPENSATION OF OTHER<br>EMPLOYEES | COMPENSATION COMMITTEE OF THE BOARD REVIEWED AND APPROVED COMP<br>CURRENT OFFICERS LISTED IN PART VII, SECTION WHO RECEIVED COMPENSAT<br>YEAR 2017.   |  |
| FORM 990, PART VI, LINE 16B -<br>JOINT VENTURES   | THE UNIVERSITY DOES NOT HAVE A WRITTEN POLICY REGARDING JOINT VENTURE HOWEVER, JOINT VENTURE AGREEMENTS ARE REVIEWED BY THE UNIVERSITY GENERAL COUNSEL TO EVALUATE WHETHER THE AGREEMENT FURTHERS THE UNIVERSITY AND TO ENSURE THE SAFEGUARDING OF UNIVERSITY'S ASSETS. TI ALSO HAS GUIDELINES CONCERNING JOINT VENTURES IN ITS TECHNOLOGY TRINVESTMENT POLICIES. | S OFFICE OF<br>MISSION OF THE<br>HE UNIVERSITY |
| FORM 990, PART VI, LINE 19 -<br>REQUIRED DOCUMENTS<br>AVAILABLE TO THE PUBLIC               | GOVERNING DOCUMENTS: THE UNIVERSITY MAINTAINS AN OFFICE FOR GLOBAL COMMUNICATION WHERE INFORMATION REQUESTS FROM THE PUBLIC ARE PROORGANIZING DOCUMENT BY WHICH THE UNIVERSITY WAS CREATED, ITS CHART UPON REQUEST. THE UNIVERSITY'S EMPLOYEE CONFLICT OF INTEREST POLICY STATEMENTS ARE AVAILABLE ON THE UNIVERSITY WEBSITE.                                     | DCESSED, THE<br>ER. IS AVAILABLE               |
| FORM 990, PART XI, LINE 9 -<br>OTHER CHANGES IN NET<br>ASSETS OR FUND BALANCES              | (a) Description CHANGE IN VALUE OF DERIVATIVE INSTRUMENTS CHANGE IN VALUE OF NONOPERATING ITEMS   | (b) Amount 7,419,000 - 1,386,000               |
| PART I, LINE 7A - QUALIFIED<br>TRANSPORTATION FRINGE<br>AND QUALIFIED PARKING               | THE UNIVERSITY'S UNRELATED BUSINESS TAXABLE INCOME FOR FISCAL YEAR I 2018 INCLUDED INCOME CREATED UNDER IRC 512(A)(7) RELATED TO QUALIFIED FRINGE BENEFITS. THE UNRELATED BUSINESS REVENUE REPORTED ON FORM I STATEMENT OF REVENUE DOES NOT INCLUDE THE EXPENSES THAT CREATE UN BUSINESS TAXABLE INCOME UNDER 512(A)(7).  | TRANSPORTATION<br>1990. PART VIII.             |

# SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

NORTHWESTERN UNIVERSITY

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public 2017

OMB No. 1545-0047

Employer Identification number Inspection

36-2167817

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part

| (a) Name, address, and BN (if applicable) of disregarded entity   | (b)<br>Primary activity | (c)<br>Legal domicile (state<br>or foreign country)                  | (d)<br>Total Income | (e)<br>End-of-year assets | Direct controlling<br>entity          |
|---|-------------------------|--|---------------------|---------------------------|---------------------------------------|
| (1) TRIAD WIS NWU, LLC (47.3504918)<br>550 N GREEN BAY RD, LAKE FOREST, IL 60045                                    | INVESTMENT              |  | 0                   | 5,044,803                 | 5,044,803 NORTHWESTER<br>N UNIVERSITY |
| (2) NORTHWESTERN UNIVERSITY USA FOUNDATION LIMITED (98-1458225)<br>21 HOLBORN VIADUCT, LONDON, ENGLAND, ECTAZDY, UK | FUNDRAISING             | UNITED KINGDOM (ENGLAND)<br>HOKTHERN PREAND, SCOTLAND,<br>AND WALES) | 0                   | 0                         | 0 NORTHWESTER<br>N UNIVERSITY         |
| (6)   |                         |  |                     |                           |                                       |
| (4)   |                         |  |                     |                           |                                       |
| (5)   |                         |  |                     |                           |                                       |
| (9)   |                         |  |                     |                           |                                       |

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II

| (a) Name, address, and EIN of related organization               | (b)<br>Primary activity                    | (c)<br>Legal domiclie (state<br>or foreign country) | (d)<br>Exempt Code section   | (e)<br>Public charity status<br>(if section 501(c)(3)) | (f) Direct controlling entity | (g)<br>Section 512(b)(13)<br>controlled<br>entity? | )<br>12(b)(13)<br>5)(ed<br>by? |
|--|--|---|--|--|-------------------------------|--|--------------------------------|
|  |  |   | w  |  |                               | Yes  | Š                              |
| (1) RUBICON INSURANCE COMPANY (36-3694409)                       | PROV DING MEDICAL<br>MAI DRACTICE COVERAGE |   | 501(C)(3)  | 12 TYPE II   | 12 TYPE II NORTHWESTER        | >  |                                |
| 2020 RIDGE AVENUE, EVANSTON, IL 60208                            |  |   | The state of the s |  | N UNIVERSIT                   |  |                                |
| (2) STUDENTS PUBLISHING COMPANY (36-6002654)                     | PUBLISHES STUDENT                          |   | 501(C)(3)  | 12 TYPE II   |                               |  | >                              |
| 1999 SHERIDAN RD, EVANSTON, IL 60208                             | PERIODICALS                                |   |  |  |                               |  |                                |
| (3) MCGAW MEDICAL CENTER OF NORTHWESTERN UNIVERSITY (36-2656113) |  | <b>=</b>  | 501(C)(3)  | 12 TYPE I  |                               |  | >                              |
| 420 E. SUPERIOR ST., CHICAGO, IL 60611                           | MEDICAL RESIDENTS                          |   |  |  |                               |  |                                |
| (4) THE BIG TEN CONFERENCE INC. (36-3640583)                     | FACILITATE QUALITY INTERCOLLEGIATE         | <u> </u>  | 501(C)(3)  | 12 TYPE II   |                               |  | >                              |
| 1500 W HIGGINS RD., PARK RIDGE, IL 60068                         | ATHLETIC COMPETITION                       |   |  |  |                               |  |                                |
| (5) COMMITTEE ON INSTITUTIONAL COOPERATION (46-3254996)          | ACADEMIC CONSORTIUM TO ADVANCE MISSION OF  | <b>=</b>  | 501(C)(3)  | 12 TYPE III-FI   |                               |  | >                              |
| 1819 S NEIL ST, CHAMPAIGN, IL 61820                              | MEMBER INSTITUTIONS                        |   |  |  |                               |  |                                |
| (6) WOMANS EDUCATIONAL AID ASSOC (36-3049387)                    | PROVIDING FINANCIAL                        | ]<br>   | 501(C)(3)  | 12 TYPE III-0  |                               |  | >                              |
| 804 OAKTON ST 1E, EVANSTON, IL 60202                             | AID IO SI UDENIS                           |   |  |  |                               |  |                                |
| (1)  |  |   |  |  |                               |  |                                |
|  |  |   |  |  |                               |  |                                |
|  |  |   |  |  |                               |  |                                |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 50135Y

Schedule R (Form 990) 2017

Page 2

Schedule R (Form 990) 2017

Part III

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

| (a) Name, address, and ElN of related organization   | (b)<br>Primary activity  | (c) Legal domicile (state or foreign country) | (d)<br>Direct controlling<br>entity                 | (e) Predominant Income (related, urnelated, excluded from tax under sections 512—514)  |                                   | Share of total S<br>Income                      | (g)<br>Share of end-of-<br>year assets | (h) Disproportionate allocations? | Code V—UBI<br>amount in box 20<br>of Schedule K-1<br>(Form 1065) | General or managing            | ļ         | (k)<br>Percentage<br>ownership                     |
|--|--|---|---|--|-----------------------------------|---|--|-----------------------------------|--|--------------------------------|-----------|--|
| (1) (SEE STATEMENT)  |  |   |   |  |                                   |   |  | Yes No                            |  | Yes                            | 2         |  |
| (2)  | TO THE PARTY OF TH |   |   |  |                                   |   |  |                                   | 111111111111111111111111111111111111111                          |                                |           |  |
| (3)  | THE THE PARTY OF T |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (4)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (5)  | THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRE |   |   | To the state of th |                                   |   |  |                                   |  |                                |           |  |
| (9)  | THEFT  |   | 7777  |  |                                   |   |  |                                   |  |                                |           |  |
| (7)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| Part IV Identification of R Ine 34, because it   | Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.  | s Taxable a                                   | us a Corporatitions treated                         | ion or Trust<br>as a corpora   | Comple<br>tion or tr              | te if the cast during                           | rganization<br>I the tax ye            | answer<br>ar.                     | ed "Yes" on  | Form 990                       | , Part    | <u>`</u>   |
| (a) Name, address, and EIN of related organization   | 1 organization F   | (b)<br>Primary activity                       | (c)<br>Legal domictie<br>(state or foreign country) | ctle Direct c  | (d) Direct controlling entity (d) | (e) Type of entity (C corp., S corp., or trust) | or trust) Inc                          | Share of total Income             | (g)<br>Share of<br>end-of-year assets                            | (h)<br>Percentage<br>ownership | Section 6 | (f)<br>Section 512(b)(13)<br>controlled<br>entity? |
| (1) (SEE STATEMENT)  |  |   |   |  |                                   |   |  |                                   |  |                                | Yes       | N <sub>O</sub>                                     |
| THE PROPERTY OF THE PROPERTY O |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (2)  | - Control of the late of   |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (e)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (4)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (5)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (9)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
| (J)  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
|  |  |   |   |  |                                   |   |  |                                   |  |                                |           |  |
|  |  |   |   |  |                                   |   |  |                                   | й  | Schedule R (Form 990) 2017     | Form 98   | 3 2017<br>2017                                     |

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Schedue R (Form 990) 2017

Part V Transactio

| 2  |   |   |   | 10                         |
|--|---|---|---|----------------------------|
| a Heceipt of (ii) interest, (iii) annutues, (iii) royattes, or (iv) rent from a controlled entity  |   | • • • • • • • • •   |   | >                          |
| b Giff grant or capital contribution to related organization(s)  | 1                                       | •   |   | 1p /                       |
|  |   |   |   | , , ,                      |
| c Gift, grant, or capital contribution from related organization(s)  | •                                       |   |   | اد ﴿                       |
| d Toans or loan guarantees to or for related organization(s)   | •                                       |   | •   | ><br>P                     |
|  |   |   |   | -                          |
| e Loans or loan guarantees by related organization(s)  |   |   |   | _e                         |
|  |   |   |   |                            |
| f Dividends from related omanization(s)  |   | •   |   |                            |
|  | •                                       |   |   | ,                          |
| g Sale of assets to related organization(s)  |   |   | •   | 7 <u>6</u>                 |
| h Purchase of assets from related organization(s)  |   |   |   | 1h /                       |
| i Exchange of assets with related organization(s)  | •                                       | •   | •   | <b>-</b>                   |
| i Lance of facilities continued to other related organization(s)   |   |   | ļ   | / i+                       |
| Lease of racinues, equipment, of onter assets to related organization(s)   | •                                       |   | ,   |                            |
| hadelen and the same and the same along the same al |   |   |   | 14                         |
| K Lease of facilities, equipment, of other assets from related organization(s)   |   |   |   | <b>&gt;</b> '              |
| <ul> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> </ul>   |   |   | •   | <b>&gt;</b>                |
| <ul> <li>Performance of services or membership or fundraising solicitations by related organization(s)</li> </ul>  |   |   | •   | 1m /                       |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  |   | •   |   | ÷                          |
| Sharing of paid employees with related organization(s)   | •                                       |   |   | 10 ×                       |
|  |   |   |   |                            |
| n Reimhusement naid to related organization(s) for expenses  | •                                       |   |   | 10 /                       |
| onimerical designations of the property of the contraction (c) for expense   |   |   | 1   | 10 / 10 T                  |
| q neilibursement pard by refated organization(s) for expenses  |   |   |   | A Br                       |
| The attention of another are an articles of adjoint of the articles  |   |   |   | 7 44                       |
| Other transfer of cash or property from related organization(s)  | •                                       |   |   | 100                        |
| ٨  | 100000000000000000000000000000000000000 |   |   | 13 4 1                     |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,   | ompiete triis line, incil               | Including covered relationships and transaction thresholds. | snips and transaction                     | n mesnoids.                |
| (a)<br>Name of related organization  | (b)<br>Transaction<br>type (a—s)        | (c)<br>Amount involved                                      | (d) Method of determining amount involved | amount involved            |
| RUBICON INSURANCE COMPANY  | Ø                                       | 2,397,145   | CASH                                      |                            |
|  |   |   | CASH                                      |                            |
| RUBICON INSURANCE COMPANY  | œ                                       | 7,040,851   |   |                            |
| KURAMO AFRICA OPPORTUNITY FUND II, LP  | æ                                       | 3,386,627   | CASH                                      |                            |
| (3)  |   |   |   |                            |
| KCG 64 CI-1, L.P.  | ๙                                       | 10,158,663  | CASH                                      |                            |
| GOTHAM NEUTRAL STRATEGIES LTD  | α                                       | 20 000 000  | CASH                                      |                            |
| (5)  |   |   |   |                            |
|  |   |   |   |                            |
|  |   |   | Schedule R                                | Schedule R (Form 990) 2017 |

# Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) (b) (c) (d) (d) (e) (f) (f) (g) (e) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g | (b)<br>Primary activity | (e) Legal domicile (state or foreign country)  | (d) Predominant Income (related, unrelated, excluded from tax under sections 512514) | (e) Are all partners section 501(c)(3) organizations? | (f)<br>Share of<br>total Income         |   | (h) Disproportionate allocations? | te Code V.—UBI<br>amount in box 20<br>of Schedule K-1<br>(Form 1065)   | General or<br>managing<br>partner? | (K) Percentage ownership   |
|--|-------------------------|--|--|---|---|---|-----------------------------------|--|------------------------------------|----------------------------|
| (1)  | 7                       |  |  |   | *************************************** |   | Tes NO                            |  | Yes                                |                            |
| (2)  |                         |  |  |   |   |   |                                   |  |                                    |                            |
| (3)  |                         |  |  |   | Parameter Company                       |   |                                   | The state of the s |                                    |                            |
| (4)  |                         |  |  |   |   |   |                                   |  |                                    |                            |
| (5)  |                         |  |  |   |   |   |                                   |  |                                    |                            |
| (9)  |                         |  |  |   | 11111111111111111111111111111111111111  |   |                                   |  |                                    |                            |
| (1)  |                         |  |  |   |   |   |                                   | ***************************************  |                                    |                            |
| (8)  |                         |  |  |   |   | *************************************** |                                   |  |                                    |                            |
| (6)  |                         |  |  |   |   |   |                                   |  |                                    |                            |
| (10)   |                         |  | 1,1,1,1  |   |   |   |                                   |  |                                    |                            |
| (11)   |                         |  | OCH PARTIES  |   |   |   |                                   |  |                                    |                            |
| (12)   |                         | To the second se | ****   |   |   |   |                                   |  |                                    |                            |
| (13)   |                         |  |  |   |   |   |                                   |  |                                    |                            |
| (14)   |                         |  |  |   |   |   |                                   |  |                                    |                            |
| (15)   |                         |  |  |   |   |   |                                   | The second secon |                                    |                            |
| (16)   |                         |  |  |   |   |   |                                   |  |                                    |                            |
|  |                         |  |  |   |   |   |                                   | Sche   | dule R (Fo                         | Schedule R (Form 990) 2017 |

| (k) Percentage ownership  | 99.00   | 100.00  |
|---|---|---|
| General P or or or or or or or or or or or or or  | ъ́<br>>   | >   |
| Ger<br>man<br>part  |   | <u></u>   |
| (h) Code V (j) Dispropor UBI amount General Figure 20 of allocation Schedule K-managing S? 1 (Form partner? 1065) Yes No      | 0   | 0   |
| (h) Disproportionate allocation s? Yes No   | <b>&gt;</b>   | >   |
| (g) Share of end-of-year Disassets all  | 6,912,317   | 11,548,410  |
|   | 177,548   | (41,553)  |
| (f) SI<br>total i   |   |   |
| (d) Direct (e) Predominant (f) Share of income total income entity excluded from lax under sections 512- and from 514 states. | EXCLUDED  | EXCLUDED  |
| (d) Direct<br>controlling<br>entity   | NORTHWE<br>STERN<br>UNIVERSIT<br>Y  | NORTHWE<br>STERN<br>UNIVERSIT<br>Y  |
| (c) Legal<br>domicile<br>(state or foreign<br>country)  | È   | 근   |
| (b) Primary Activity  | INVESTMENT  | INVESTMENT  |
| (a) Name, address and EIN of related organization (b) Primary Activity  | (1) KURAMO AFRICA OPPORTUNITY FUND II, LP<br>(47-3117325)<br>500 5TH AVE, 44TH FL, NEW YORK, NY 10110 | (2) KCG 64 CI-1, L.P. (82-3391115)<br>7121 FAIRWAY DR, STE 410, PALM BEACH<br>GARDENS, FL 33418 |

Identification of Related Organizations Taxable as a Corporation or Trust (continued)

| (b) Primary activity |
|----------------------|
|                      |
|                      |
|                      |
|                      |
| NVESTMENTS           |
| INVESTMENTS          |
| NVESTIN              |

| Part VII | Supplemental Information. | Provide additional information for responses to questions on Schedule R |
|----------|---------------------------|---|
|          | (see instructions).       |   |

| Return Reference - Identifier        | Explanation  |
|--------------------------------------|--|
| SCHEDULE R, PART IV,<br>COLUMN (C) - | THE CHARITABLE REMAINDER UNITRUSTS AND CHARITABLE REMAINDER ANNUITY TRUSTS ARE PREDOMINANTLY DOMICILED IN ILLINOIS |